Cardholder Name	Dep. B Leazer # 9181
Department	SHERIFF 100-33100
Last 4 Digits of Card	5192

Month AUG 15 - SEPT 15 2020



\*Must be completed if charge is for a meal

				a meai.	
Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
8/24/2020	CIRCLE K	GAS	\$44.51	100-33260-531270	

Statement Total:

\$44.51

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

**Cardholder Signature** 

Dep In 9181

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

> **CARD SERVICES** P.O. BOX 2181 COLUMBUS GA 31902-2181

Account NumberXXXX-XXXX-XXXX-5192

Payment Due

N/A

New Balance

N/A

Minimum Payment

N/A

**BILLY R LEAZER NEWTON COUNTY BOC STE 204** 1113 USHER ST NW **COVINGTON GA 30014-2471** 

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762000235192

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Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

N/A

#### Visa Account Summary

Account Number Statement Closing Date Credit Line Available Credit Minimum Payment Payment Due Date

XXXX-XXXX-XXXX-5192 September 15, 2020 \$2,500.00 N/A N/A

Previous Balance Credits

Purchases and Debits Cash Advances **FINANCE CHARGE** New Balance

Balance Summary

N/A \$0.00 \$44.51 \$0.00

N/A N/A

#### Important Contact Information

(See reverse side for billing and other important information)

Payment Address:

Pay Online:

TTY Telephone:

Card Services P.O. Box 2181

Columbus, GA 31902-2181 www.commercialcardview.com

1-877-254-3568

Customer Inquiries Address:

Commercial Customer Support

P.O. Box 23061 Columbus, GA 31902-3061

Customer Service:

1-888-SYNOVUS (796-6887)

#### Transaction Detail

Trans Post Date Date Description

**Purchase** Order No.

Amount

08/24

\$44.51

2180 JE K #2745084 2180 JE K #2745084

The state of the s

Store m / Asion: MT-000000924014 Associa e - Mod ca p

don (\* 24. 2020 9 41:00 AM

Sub [518] 4] 1 [518] 541 1

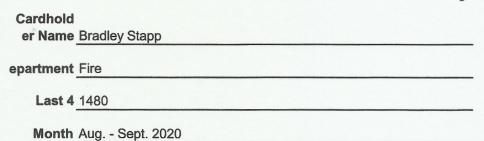
Visa ENTRY

Sugar

4: 1

HAVE I NET THE THE THE PARTY OF THE PARTY OF

Signup for Easy Pay at www.circlek.com Questions?? Call Custower Service at 1-077-362-035) Option (





\*Must be completed if

					сотрієтеа іт
Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
8/17/2020	IAFC	membership renewal for International Association of Fire Chiefs	\$225.00	523600	
8/17/2020	IAAI	membership renewal for International Association of Arson Investigators	\$125.00	523600	
8/29/2020	Hilton	Santa Rosa Island Authority fee	\$100.48	523500	
8/29/2020	Hilton	Santa Rosa Island Authority fee	\$100.48	523500	
9/2/2020	Hilton	SRIA fee refund (credit)	-\$90.48	523500	
		SRIA fee refund (credit)	-\$90.48	523500	
9/14/2020	Paypal - Bearers of the Oath	Training conference registration for 3 personnel	\$300.00	10035200 523700	

Statement Total:

\$670.00

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Cardholder Signature

Approval Signature (Department Head, Elected Of

### **YNOVUS<sup>®</sup>**

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061 SERVICES

**CARD SERVICES** P.O. BOX 2181 COLUMBUS GA 31902-2181 Account NumberXXXX-XXXX-XXXX-4177 Payment Due N/A New Balance N/A Minimum Payment N/A

**BRADLEY TODD STAPP NEWTON COUNTY BOC STE 204** 1113 USHER ST NW **COVINGTON GA 30014-2471** 

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760038094177

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**Customer Inquiries Address:** 

00000000

Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

#### Visa Account Summary

Account Number XXXX-XXXX-XXXX-4177 Statement Closing Date September 15, 2020 Credit Line \$5,000.00 Available Credit N/A Minimum Payment N/A Payment Due Date N/A

#### Balance Summary

Previous Balance N/A Credits \$180.96 Purchases and Debits \$850.96 Cash Advances \$0.00 **FINANCE CHARGE** N/A New Balance N/A

#### Important Contact Information

(See reverse side for billing and other important information)

Card Services Payment Address:

P.O. Box 2181

1-877-254-3568

Columbus, GA 31902-2181

www.commercialcardview.com

Commercial Customer Support

P.O. Box 23061

Columbus, GA 31902-3061

Customer Service: 1-888-SYNOVUS (796-6887)

#### Transaction Detail

Pay Online:

TTY Telephone:

Trans Date		Description	Purchase Order No.	Amount
08/17	08/18	INT'L ASSOC OF FIRE CHIE 703-273-9672 VA	AF0A2F97C8F4	\$225.00
08/17	08/19	IAAI 410-451-3473 MD	100930529263	\$125.00
08/29	08/31	HILTON PENSACOLA BEACH PENSACOLA BEA FL		\$100.48
08/29	08/31	000074 ARRIVAL: 08-24-20 HILTON PENSACOLA BEACH PENSACOLA BEA FL		\$100.48
09/02	09/03	000074 ARRIVAL: 08-24-20 HILTON PENSACOLA BEACH PENSACOLA BEA FL ****************** MEMO ITEM ************************************		\$90.48CR
09/02	09/03	000074 ARRIVAL: 08-24-20 HILTON PENSACOLA BEACH PENSACOLA BEA FL ****************** MEMO ITEM ************************************		\$90.48CR
09/14	09/15	000074 ARRIVAL: 08-24-20 PAYPAL *KINDBRO07 402-935-7733 CA **********************************	67792661	\$300.00



#### **International Association of Fire Chiefs**

4795 Meadow Wood Ln Suite 100 Chantilly, VA 20151 (703) 273-0911

https://www.iafc.org



#### **THANK YOU!**

#### Receipt Header

Date 8/17/2020
Receipt Number 0000058947
Customer Brad Stapp
Total \$225.00

QUANTITY	LINE DESCRIPTION	SALE PRICE	TOTAL
1	Full Membership	\$195.00	\$195.00
1	Southeastern Division Dues	\$30.00	\$30.00
		SUBTOTAL:	\$225.00
		TOTAL:	\$225.00



# **International Association of Arson Investigators**

Invoice #: 38988 Date: 08/17/2020 Due: Upon Receipt

INVOICE

PO #:

16901 Melford Blvd Ste 101 Bowie, MD 20715-4444 410-451-3473 410-451-9049 (Fax) www.firearson.com

#### TO:

Brad Stapp Newton County Fire Service 4136 Highway 278 E Covington, GA 30014 US

Quantity	Description	Unit Price	Payment	Total
1	Active - 1yr	\$100.00	\$100.00	\$100.00
1	Georgia - Active 1yr	\$25.00	\$25.00	\$25.00
		SUBTOTA	\$125.00	\$125.00
		SALES TAX	<	\$0.00
		SHIPPING & HANDLING	3	\$0.00
		TOTAL DU	=	\$0.00
		<b>=</b>	\$0.00	



### **Keep your tickets handy**

Get the app

#### BEARERS OF THE OATH FIRE CONFERENCE



3 x Tickets

Order total: \$300.00

Friday, October 2, 2020 at 8:00 AM - Sunday, October 4, 2020 at 5:00 PM (EDT)

Add to Google · Outlook · iCal · Yahoo

Jackson County Fire Training Center

64 Fowler Drive Jefferson, GA 30549 (View on map)

View event details

Bearers of the Oath

Follow

Questions about this event?

Contact the organizer

### **Order Summary**

Order #1453522543 - September 14, 2020

\$300.00 paid by PayPal

Payer: bredmond@co.newton.ga.us

Payee: kindbro07@yahoo.com

Transaction ID: 8YA9037003108281K

Kregg Lumpkin	1 x Bearers Of The Oath Conference Pass	\$100.00
Chris Calhoun	1 x Bearers Of The Oath Conference Pass	\$100.00
Brad Redmond	1 x Bearers Of The Oath Conference Pass	\$100.00



I have refunded all room and sales tax back to each individual card for all 5 rooms. I cannot refund the SRIA (Santa Rosa Island Authority Fee) because it is not a tax. The SRIA fee added up to about \$10 per guest so that will stay on each card.



You should all see a refund in the amount of \$90.48 within the next 5-7 business days. Please let me know if you do not receive that refund. Thank you!

-Jasmine King Front Desk Hilton Pensacola Beach 12 Via De Luna Dr. Pensacola Beach, FL 32561

p) 850.916.2999 f) 850.934.0891 www.hiltonpensacolabeach.com

Not already a Hilton Honors Member? Click below to sign up!



From: Meredith Biles <mbiles@co.newton.ga.us>

Sent: Tuesday, September 1, 2020 11:09 AM

To: Front Desk Hilton <frontdeskhiltonpb@innisfreehotels.com>

Cc: David Turley <dturley@co.newton.ga.us>; Tyler Hope <thope@co.newton.ga.us>; Bryan Shirley

<bshirley@co.newton.ga.us>; Bradley Redmond <bredmond@co.newton.ga.us>

Subject: Newton County Fire Tax Exemption Form

[Quoted text hidden]

David Turley <a href="mailto:child.com">Cturley@co.newton.ga.us</a>

To: "bluelaurie1977@gmail.com" <bluelaurie1977@gmail.com>

Tue, Sep 1, 2020 at 3:43 PM

FYI

Forwarded message -From: Front Desk Hilton <frontdeskhiltonpb@innisfreehotels.com> [Quoted text hidden] [Quoted text hidden]

Cardholder Name	BRANDON ESQUE
Department	SHERIFF'S OFFICE
_ast 4 Digits of	2179
Month	SEPTEMBER 15 2020



\*Must be completed if charge is for a meal

	THE RESERVE THE PROPERTY OF THE PARTY OF THE		CONTRACTOR OF THE SECOND		ioi a illeai.
Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
8/19/2020	WEB NETWORK	MONTHLY WEB HOSTING-INVOICE 35321445	\$4.99	100-33100-523600	
8/27/2020	ZOOM.COM	MONTHLY WEB HOSTING - INVOICE INV38304977	\$14.99	100-33100-523600	
8/29/2020	ZOOM.COM	MONTHLY WEB HOSTING - INVOICE INV38621883	\$14.99	100-33100-523600	
9/11/2020	ZOOM.COM	MONTHLY WEB HOSTING - INVOICE INV INV40850751	\$14.99	100-33100-523600	
9/11/2020	ZOOM.COM	MONTHLY WEB HOSTING - INVOICE INV40850541	\$14.99	100-33100-523600	

**Statement Total:** 

\$64.95

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Cardholder Signature

## Synovus<sup>®</sup>

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

> CARD SERVICES P.O. BOX 2181 COLUMBUS GA 31902-2181

CARD SERVICES

Account NumberXXXX-XXXX-XXXX-1609
Payment Due N/A

New Balance N/A Minimum Payment N/A

BRANDON ESQUE NEWTON COUNTY BOC STE 204 1113 USHER ST NW COVINGTON GA 30014-2471

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760038031609

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Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

#### Visa Account Summary

# Account Number XXXX-XXXX-1609 Statement Closing Date September 15, 2020 Credit Line \$1,000.00 Available Credit N/A Minimum Payment N/A Payment Due Date XXX-XXXX-XXXX-1609 September 15, 2020 September 15, 2020 N/A

#### **Balance Summary**

Previous Balance	N/A
Credits	\$0.00
Purchases and Debits	\$64.95
Cash Advances	\$0.00
FINANCE CHARGE	N/A
New Balance	N/A

(See reverse side for billing and other important information)

#### Important Contact Information

Payment Address: Ca

Card Services

P.O. Box 2181

Columbus, GA 31902-2181 www.commercialcardview.com

Pay Online: TTY Telephone:

1-877-254-3568

Customer Inquiries Address:

Commercial Customer Support

P.O. Box 23061

Columbus, GA 31902-3061

Customer Service:

1-888-SYNOVUS (796-6887)

#### Transaction Detail

Trans Date	Post Date	Description	Purchase Order No.	Amount
08/19	08/20	WEB*NETWORKSOLUTIONS 888-6429675 FL	1159414086	\$4.99
08/27	08/28	ZOOM.US 888-799-9666 CA	P-40919940	\$14.99
08/29	08/31	ZOOM.US 888-799-9666 WWW.ZOOM.US CA	32662606	\$14.99
09/11	09/14	ZOOM.US 888-799-9666 WWW.ZOOM.US CA	42003843	\$14.99
09/11	09/14	ZOOM.US 888-799-9666 WWW.ZOOM.US CA	42037454	\$14.99

Synovus<sup>®</sup>

Network Solutions, LLC 5335 Gate Parkway Jacksonville, FL32256

Account Name:

Newton Country Sheriffs Office

Account ID:

30417294

Address:

**Newton Country Sheriffs Office** 

15151 ALCOVÝ RD

COVINGTON, GA30014-6405

Invoice # 35321445

#### **Charges and Credits:**

Date	Туре	Product Type	Product Name	Term	Amount	Tax	Tax Type	Total Charges
08/19/20	Renewal	SiteLock Basic	Newtonsheriffga.org	Monthly	\$4.99	\$0.00		\$4.99
			Total Invoice	e Amount	\$4.99	\$0.00		\$4.99

#### Payments:

Date	Order Number	Payment Method	Check/Card#/PayPal ID	Total Payments
08/19/20	1159414086	CreditCard	****1609	\$4.99

#### **Please Note:**

- 1. The payment information shown may not reflect the payment method used for each transaction, and all billing activity may not be shown here.
- 2. Order numbers may appear in multiple accounts if an order included services from more than one account.
- 3. Recent purchases may take 24 to 48 hours to appear in your billing information.
- 4. All .ca domain names are registered by Network Solutions Canada ULC (Business Number: 83624 3543 RT 0001). The amount charged for .ca domain names includes applicable Goods and Services Tax (GST) of 5%. Effective July 1, 2010, the amounts charged for .ca domain names are inclusive of Federal GST and, where applicable, also inclusive of Provincial HST. (GST Rate 5%, Combined GST rate and HST rate for each Province British Columbia 12%, Ontario 13%, Nova Scotia 15%, Newfoundland and Labrador 13%, New Brunswick 13%)
- 5. Some products and services are subject to sales tax. Taxes charged reflect the jurisdiction of your business address.



Zoom Video Communications Inc. 55 Almaden Blvd, 6th Floor San Jose, CA 95113 billing@zoom.us

Remittance Details should be sent to:

Finance@zoom.us

Purchase Order Number:

Tax Exempt Certificate ID:

Invoice Date: 08/27/2020 Invoice #: INV3830497

Currency:

Invoice #:
Payment Terms:
Due Date:
Account Number

Account Information:

08/27/2020 INV38304977 Due Upon Receipt 08/27/2020 115038344 USD

NCSO 15151 ALCOVY RD,

COVINGTON, Georgia 30014

**United States** 

besque@newtonsheriffga.org

#### Zoom W-9

	CHARGE DETAILS		A Sept	
Charge Description	Service Period	Subtotal	Tax	TOTAL
Charge Name: Standard Pro Monthly Quantity: 1 Unit Price: \$14.99	08/27/2020-09/26/2020	\$14.99	\$0.00	\$14.99

INVOICE TOTALS		
	Subtotal:	\$14.99
	Total (Including Tax):	\$14.99
	Invoice Balance:	\$0.00

	TAX DETAILS			
Charge Name	Tax Name	Jurisdiction	Charge Amount	Tax Amount
-			Total	00.00
			Tax	\$0.00

TRANSACTIONS	
Invoice Total	\$14.99





Transaction Date	Transaction Number	Transaction Type	Description	Applied Amount
08/27/2020	P-40919940	Payment		(\$14.99)
			Invoice Balance	\$0.00

Zoom Phone services provided by Zoom Voice Communications, Inc. Rates, terms and conditions for Zoom Phone services are set by Zoom Voice Communications, Inc.



Zoom Video Communications Inc. 55 Almaden Blvd, 6th Floor San Jose, CA 95113 billing@zoom.us

15151 ALCOVY RD,

COVINGTON, Georgia 30014

United States

ncsozoom@newtonsheriffga.org

Remittance Details should be sent to:

Finance@zoom.us

Purchase Order Number:

Tax Exempt Certificate ID:

#### Zoom W-9

	CHARGE DETAILS			
Charge Description	Service Period	Subtotal	Tax	TOTAL
Charge Name: Standard Pro Monthly Quantity: 1 Unit Price: \$14.99	08/29/2020-09/28/2020	\$14.99	\$0.00	\$14.99

INVOICE TOTALS		
	Subtotal:	\$14.99
	Total (Including Tax):	\$14.99
	Invoice Balance:	\$0.00

<b>建设设施</b> (1) 10 10 10 10 10 10 10 10 10 10 10 10 10	TAX DETAILS			
Charge Name	Tax Name	Jurisdiction	Charge Amount	Tax Amount
			Total Tax	\$0.0

TRANSACTIONS	40000
Invoice Total	\$14.99



Transaction Date	Transaction Number	Transaction Type	Description	Applied Amount
08/29/2020	P-41236394	Payment		(\$14.99)
			Invoice Balance	\$0.00

Zoom Phone services provided by Zoom Voice Communications, Inc. Rates, terms and conditions for Zoom Phone services are set by Zoom Voice Communications, Inc.



Zoom Video Communications Inc. 55 Almaden Blvd, 6th Floor San Jose, CA 95113 billing@zoom.us

Invoice #: INV40850751
Payment Terms: Due Upon Receipt
O9/11/2020
Account Number Currency: USD
Account Information: NCSO

Invoice Date:

15151 ALCOVY RD, COVINGTON, Georgia 30014

United States

09/11/2020

jail-zoom@newtonsheriffga.org

Remittance Details should be sent to:

Finance@zoom.us

Purchase Order Number:

Tax Exempt Certificate ID:

#### Zoom W-9

	CHARGE DETAILS			
Charge Description	Service Period	Subtotal	Tax	TOTAL
Charge Name: Standard Pro Monthly Quantity: 1 Unit Price: \$14.99	09/11/2020-10/10/2020	\$14.99	\$0.00	\$14.99

THE REAL PROPERTY.	Part Property of the Control of the	INVOICE TOTALS	
\$14.99	Subtotal:		
\$14.99	Total (Including Tax):		
\$0.00	Invoice Balance:		

	TAX DETAILS			
Charge Name	Tax Name	Jurisdiction	Charge Amount	Tax Amount
			Total	£0.00
			Tax	\$0.00

TRANSACTIONS	
Invoice Total	\$14.99



Transaction Date	Transaction Number	Transaction Type	Description	Applied Amount
09/11/2020	P-43545385	Payment		(\$14.99)
			Invoice Balance	\$0.00

Zoom Phone services provided by Zoom Voice Communications, Inc. Rates, terms and conditions for Zoom Phone services are set by Zoom Voice Communications, Inc.



Zoom Video Communications Inc. 55 Almaden Blvd, 6th Floor San Jose, CA 95113 billing@zoom.us

Invoice Date: 09/11/2020 Invoice #: INV40850541 Payment Terms: Due Upon Receipt Due Date: 09/11/2020 Account Number 7002067844 Currency: Account Information: USD NCSO

15151 Alcovy Rd, Covington, Georgia 30014 United States

Sheriff-zoom@newtonsheriffga.org

Remittance Details should be sent to:

Finance@zoom.us

Purchase Order Number:

Tax Exempt Certificate ID:

#### Zoom W-9

CHARGE DETAILS					
Charge Description	Service Period	Subtotal	Tax	TOTAL	
Charge Name: Standard Pro Monthly Quantity: 1 Unit Price: \$14.99	09/11/2020-10/10/2020	\$14.99	\$0.00	\$14.99	

INVOICE TOTALS	<b>建筑物理学</b>	
	Subtotal:	\$14.99
	Total (Including Tax):	\$14.99
	Invoice Balance:	\$0.00

THE RESERVE THE PROPERTY OF	TAX DETAILS			
Charge Name	Tax Name	Jurisdiction	Charge Amount	Tax Amount
			Total	\$0.00
			Tax	\$0.00

TRANSACTIONS	
Invoice Total	\$14.99





Transaction Date	Transaction Number	Transaction Type	Description	Applied Amount
09/11/2020	P-43545154	Payment		(\$14.99)
			Invoice Balance	\$0.00

Zoom Phone services provided by Zoom Voice Communications, Inc. Rates, terms and conditions for Zoom Phone services are set by Zoom Voice Communications, Inc.

Cardholder Name	1ST LT. Brice Smith	
Department	DETENTION	
Last 4 Digits of Card	XXXX-XXXX-XXXX-8290	
Month	Aug-20	



\*Must be completed if charge is for

					a meal.
Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
9/15/2020	QUICKTRIP	TRANSPORT	\$20.00	100 33260 53 1270	
		Statement Total:	\$20.00		The sent the state of the state

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Cardholder Signature

P.O. BOX 23061 COLUMBUS GA 31902-3061

> **CARD SERVICES** P.O. BOX 2181 COLUMBUS GA 31902-2181

Account NumberXXXX-XXXX-XXXX-8290

Payment Due

N/A

New Balance

N/A

Minimum Payment

N/A

**BRICE D SMITH NEWTON COUNTY BOC STE 204** 1113 USHER ST NW **COVINGTON GA 30014-2471** 

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Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

#### Visa Account Summary

Account Number XXXX-XXXX-XXXX-8290 Statement Closing Date September 15, 2020 Credit Line \$1,000.00 Available Credit N/A Minimum Payment N/A Payment Due Date N/A

#### **Balance Summary**

Previous Balance N/A Credits \$0.00 Purchases and Debits \$20.00 Cash Advances \$0.00 **FINANCE CHARGE** N/A New Balance N/A

#### Important Contact Information

(See reverse side for billing and other important information)

Payment Address:

Card Services P.O. Box 2181

Columbus, GA 31902-2181

www.commercialcardview.com

Customer Inquiries Address:

Commercial Customer Support

P.O. Box 23061

Columbus, GA 31902-3061

Pay Online: TTY Telephone: 1-877-254-3568

Customer Service:

1-888-SYNOVUS (796-6887)

#### Transaction Detail

Trans Post **Purchase** Date Date Description Order No. Amount 08/27 08/31 QT 802 CONYERS GA 008020254ESPB6 \$20.00 \*\*\*\*\*\*\*\*\*\*\*\*\* MEMO ITEM \*\*\*\*\*\*\*\*\*\*\*

# SYNOVI IS

#### Welcome to QuikTrip

#### QuikTrip #00802

2400 SALEM RD. SE CONYERS,GA 7707614384

10:08:41 AM

08-27-2020

Register #0002

Gas Sale:

\$20.00

Pump: 6

Sub-Total:

\$20.00

Tax:

\$.00

Total:

\$20.00

### Payment Methods

Visa Sale

\$20.00

APP: VISA CREDIT

Mode: Issuer AID: A0000000031010

TVR: 8000008000 TSI: 6800

IAD: 06010A03A00000

Signature not required \*\*\*\*\*\*\*\*\*\*8290 Auth Code: 010775

Entry Mode: Chip Read

Duplicate We Thank You Please Come Again

Cardholder Name	Christine MacDonald	_
Department	District Attorney's Office	
Last 4 Digits of Card	-8818	
Month	Oct-20	





\*Must be completed if charge is for a meal

			W 411/2/2/24		a meal.
Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Goding	*Meal Attendees
10.14.20	KROGER	GRAND JURY COFFEE SUPPLIES	\$42.64	100.22000.531100	
	. :				
	Date: 11 Time: 11 Time: 11 Entry II See Fuel Po Total Oc With	COVINA VISA COVINA VISA CO ************************************	88	SC KROGER	
]		KRO COFFE  TAX EXEMP  TAX EXEMP  WAS AS A			
<u> </u>	<u> </u>	KRO COFFEE TAX TAX EXEMPTION TAX	TRARES COLLEGE STATE OF THE STA	KRO PURIFIED WATERPC KROGER SAVINGS CRO PURIFIED WATERPC KROGER SAVINGS CRO CUTLERY PLUS CUSTOMER KRO HALF & HALF KRO HALF & CRACKERSPC NBSC RITZ CRACKERSPC NBSC RITZ CRACKERSPC KROGER SAVINGS O. 50 KROGER SAVINGS O.	0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Savings \$88	541 541 541 541	* 41 <b>5</b> 5 ≥ 5	<b>₹</b> %	WATERPO	
.com	DOING: POINTS: Black.com 541-547 ssary sal rules 1:443 1:43 1:43 1:43 1:43 1:43 1:43 1:4	**************************************	<u></u>	<u>- νν</u> ω ω	
	*	<del>*</del>	മമമയ പപപ	79 BBBBB37 T	ONE
			}		ž
	,	Statement Total:	\$42.64		

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

# **SYNOVUS**

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

CARD SERVICES P.O. BOX 2181 COLUMBUS GA 31902-2181

ARD

# SERVICES

₹ ¥ Account NumberXXXX-XXXX-XXXX-8818 Minimum Payment Payment Due New Balance

CHRISTINE M MACDONALD NEWTON COUNTY BOC STE 204 1113 USHER ST NW COVINGTON GA 30014-2471

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760038058818

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Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

Visa Accou	Visa Account Summary	Balance Summary	ımary
Account Number Statement Closing Date Credit Line Available Credit Minimum Payment Payment Due Date	g Date XXXX-XXXX-8818 G Date October 15, 2020 \$1,500.00 tt N/A it N/A	Previous Balance Credits Purchases and Debits Cash Advances FINANCE CHARGE	N/A \$0.00 \$42.64 \$42.64 \$0.00 E N/A
Important (	Important Contact Information	(See reverse side for billing an	(See reverse side for billing and other important information)
Payment Address:	Card Services P.O. Box 2181	Customer Inquiries Address:	Commercial Customer Support P.O. Box 23061
Pay Online: TTY Telephone:	Columbus, CA STSUZ-2181 Www.commercialcardview.com 1-877-254-3568	Customer Service:	Columbus, GA 31902-3061 1-888-SYNOVUS (796-6887)
Transaction Detail	n Detail		
Trans Post Date Date Description	scription	Purchase Order No.	Amount
10/14 10/15 KR	10/14 10/15 KROGER #214 COVINGTON GA		\$42.64

SYNOVUS

Cardholder Name	Christine MacDonald	
Department	District Attorney's Office	
Last 4 Digits of Card	-8818	
Month	Sep-20	





\*Must be completed if charge is for a meal.

					a meal.
Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
9/10/2020	Pawn Pro	Firearm ammunition for Investigators	\$279.98	100.22000.523710	
		### PRO ### PRO #### PRO ###############	AMOUNT \$279.98  APPROVED VISA CREDIT AID: A000000031010 TVR: 80 80 00 80 00 TS: 68 00	By O Cach €	169778 D 09/10/2020 9:44a
		Statement Total	\$279.98		Visa/MC 279.98

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Cardholder Signature

# SYNOVUS

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

CARD SERVICES P.O. BOX 2181 COLUMBUS GA 31902-2181

ARD

# SERVICES

Account NumberXXXX-XXXX-XXXX-8818 Minimum Payment Payment Due New Balance

CHRISTINE M MACDONALD
NEWTON COUNTY BOC
STE 204
1113 USHER ST NW
COVINGTON GA 30014-2471

0000000 \*

760038058818

000000000

000000000

Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

Visa Account Summary	ımary	Balance Summary	
Account Number Statement Closing Date Credit Line Available Credit Minimum Payment	XXXX-XXXX-8818 September 15, 2020 \$1,500.00 N/A	Previous Balance Credits Purchases and Debits Cash Advances FINANCE CHARGE	N/A \$0.00 \$279.98 \$0.00
Payment Due Date Important Contact Information	Information	NA (See reverse side for billing and other important information)	N/A tant information)

important Co	important confact information	(See reverse side for billing an	(See reverse side for billing and other important information)
Payment Address:	Card Services P.O. Box 2181	Customer Inquiries Address:	Commercial Customer Support P.O. Box 23061
Pay Online:	Columbus, GA 31902-2181 www.commercialcardview.com		Columbus, GA 31902-3061
in interpredict.	0000-407-770-1	Customer service:	1-888-94NOVOS (/88-988/)

	Amount
	Purchase Order No.
ransaction Detail	Trans Post Date Date Description

\$279.98

00000

09/10 09/14 PAWN PRO COVINGTON GA

1-888-SYNOVUS (796-6887)

Customer Service:



Cardholder Name Dana Darby	TOW
Department Tax Office	* 1821
Last 4 Digits	
of Card xxx8484	
	*Must be
Month Sep-20	completed

Date	Vendor	Description and Business Purpose of Expenditure	Total	ccount Codin	*Meal Attendee s
	Carl				
9/1-9/3	Vinson	Government Training	\$199.00	523700	
	+				
			-		
		Training via zoom	\$199.00	523700	

Statement Total: \$199.00

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Cardholder Signature

Page 1 of 1

A/N

A\N

A/N

00'661\$

**JunomA** 

A/N

00.0\$

00.0\$

A\N

00.661\$

(7883-367) SUVONYS-888-1



Account NumberXXXX-XXXX-8484

Minimum Payment

New Balance

Payment Due

000000000

P.O. BOX 23061 SYNOVUS BANK

COLUMBUS GA 31902-3061

P.O. BOX 2181 CARD SERVICES

COLUMBUS GA 31902-2181

0000000 \*\*

000000000

COVINGTON GA 30014-2471 NEWTON COUNTY BOC YARAD ANAD

TTT3 N2HER ST NW **STE 204** 

48484C000297

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

Balance Summary

\$5,500.00 September 15, 2020 4848-XXXX-XXXX-XXXX

A/N A\N A\N

Payment Due Date Minimum Payment Available Credit Credit Line Statement Closing Date Account Number

Payment Address:

(See reverse side for billing and other important information)

P.O. Box 23061 Commercial Customer Support Customer Inquiries Address:

Columbus, GA 31902-3061

FINANCE CHARGE

Purchases and Debits

Cash Advances

New Balance

Credits

Previous Balance

Customer Service:

**AI0A9DE3B936** 

Order No.

Purchase

www.commercialcardview.com Columbus, GA 31902-2181

1-877-254-3568

Important Contact Information

P.O. Box 2181 Card Services

TTY Telephone: Pay Online:

Visa Account Summary

Please Detach and Return With Your Payment

Transaction Detail

Date Description Trans Post

..... WEWO ILEM ...... 09/01 09/03 GOVERNMENT TRAINING 706-542-9532 GA

SUVONYS



RROMOTING **EXCELLENCE** IN GOVERNMENT

SIGN OUT

TRAINING HOME

SELECT A COURSE

CONTACT US

VIEW SHOPPING CART

Welcome, Dana Darby

#### CHECKOUT COMPLETE. THANK YOU!

Please print this confirmation page for your records.

Registrant: DANA DARBY TAX COMMISSIONER NEWTON COUNTY TAX COMMISSIONER'S OFFICE 1113 USHER ST SUITE 101 **COVINGTON GA 30014** (678) 625-1630

Payment: \$199.00 PFLink Online Invoice #125822 DANA DARBY 1113 USHER ST COVINGTON GA 30014

County Tax Officials Institute Conference

Course:

TAX 103-00

Term:

F2021

12337

Section Number:

Schedule

Number:

Wilbur Yaun, Michael Hourihan, Tracie Scott, Robert Worle, Crystal Powell, David Curry, Tabetha DuPriest, Marcel Russell, Brad

Instructor(s):

Hutchins, Brent Bennett, Julia Rodgers, Denise Mitchell, Carolyn Kaplan, Ric Baxter, Jon Watson, Mark White, Natalie Sellers, Pierce

Waldrep, Nadeen Allen, Chris Laney, Casey Vance

Location:

Virtual Online Instruction, Zoom Platform

Dates:

Aug. 31, 2020 (Mon., 9 a.m. - 4 p.m.); Sep. 1, 2020 (Tue., 9 a.m. - 4 p.m.); Sep. 2, 2020 (Wed., 9 a.m. - 4 p.m.); Sep. 3, 2020 (Thu., 9 a.m. - 4 p.m.); Sep. 8, 2020 (Tue., 9 a.m. - 4 p.m.); Sep. 9, 2020 (Wed., 9 a.m. - 4 p.m.); Sep. 10, 2020 (Thu., 9 a.m. - 4 p.m.)

3.5 CEUs

Units: Contact

Hours:

35.0 Contact Hours

Breakout Session(s) Selected:

3.0 hrs : Mobile Home Collection Strategies (Concurrent Session) 9/2/2020 1:00 PM to 4:00 PM

3.0 hrs : Accounting and Finance for Tax Officers (TC / Acctg. Only) (Concurrent Session) 9/3/2020 1:00 PM to 4:00 PM

3.0 hrs : Personal Property Collection Strategies (Concurrent Session) 9/8/2020 1:00 PM to 4:00 PM

3.0 hrs : Customer Service for Employees (Concurrent Session) 9/9/2020 9:00 AM to 12:00 PM

3.0 hrs : Tax Sales (Concurrent Session) 9/10/2020 9:00 AM to 12:00 PM

**Enrollment Fees** 

Registration - 1) First Attendee from County (One attendee from each county must register at this rate)

\$199.00

\$199.00

Price

Total for This Item:

\$199.00

**Total Payment:** Reference #R620733

> 201 North Milledge Avenue, Albena GA 30602 Business Hours: Monday - Friday, 8:00 A.M. - 5:00 P.M. Need Helip?

©2017 Carl Vinson Institute of Government

Cardholder		
Name	EZELL BROWN	
Department	SHERIFF'S OFFICE	
Last 4 Digits of	8735	



\*Must be completed if charge is for a

Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
8/20/2020	FACEBOOK	ADVERTISING	\$26.30	100-33100-523300	
8/24/2020	MARQUIS WHO'S WHO		\$989.00	100-111910	
		view, create, manipulate, print and manage files in Portable Document	ĺ		500.000
9/6/2020	ADOBE -PRO SUBS CC	Format (PDF)	\$14.99	100-33100-523301	523600
9/11/2020	EIG CONSTANT CONTACT	ADVERTISING	\$45.00	100-33100-523300	
9/13/2020	ADOBE -CREATIVE CLOUD	CREATE PROJECTS-MANAGE ADOBE FILES-DOWNLOAD FONTS	\$52.99	100-33100-523300	523600

Statement Total:

\$1,128.28

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Cardhelder Signature

Month SEPTEMBER 15 2020

# SYNOVUS<sup>®</sup>

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

> CARD SERVICES P.O. BOX 2181 COLUMBUS GA 31902-2181

CARD

SERVICES

Account NumberXXXX-XXXX-XXXX-8735

Payment Due

N/A

New Balance

N/A

Minimum Payment

N/A

EZELL BROWN
NEWTON COUNTY BOC
STE 204
1113 USHER ST NW
COVINGTON GA 30014-2471

\*\* 0000000

760038058735

000000000

000000000

Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

#### Visa Account Summary

Account Number XXXX-XXXX-8735
Statement Closing Date September 15, 2020
Credit Line \$5,000.00
Available Credit N/A
Minimum Payment N/A
Payment Due Date N/A

#### **Balance Summary**

 Previous Balance
 N/A

 Credits
 \$0.00

 Purchases and Debits
 \$1,128.28

 Cash Advances
 \$0.00

 FINANCE CHARGE
 N/A

 New Balance
 N/A

#### Important Contact Information

(See reverse side for billing and other important information)

Payment Address:

Card Services P.O. Box 2181 Customer Inquiries Address:

Commercial Customer Support

P.O. Box 23061

Coldi

Columbus, GA 31902-3061

Pay Online: TTY Telephone:

1-877-254-3568

Columbus, GA 31902-2181

www.commercialcardview.com

Customer Service:

1-888-SYNOVUS (796-6887)

#### Transaction Detail

Trans	Post		Purchase	
Date	Date	Description	Order No.	Amount
08/20	08/20	FACEBK 5EPS9WAWJ2 650-5434800 CA	420429000200589	\$26.30 (aitlin
08/24	08/25	MARQUIS WHO'S WHO 908-673-1000 NJ	6F82F1BD08AF44C99	(\$989.00) need:
See.		******** MEMO ITEM **********		
909/06	09/07	ADOBE ACROPRO SUBS 408-536-6000 CA	BL1254679631	\$14.99
09/11	09/14	EIG*CONSTANTCONTACT.COM 855-2295506 MA	1115977047733	\$45.00 Cartlin & Chris
09/13	09/14	ADOBE CREATIVE CLOUD 408-536-6000 CA	BL1258767745	\$52.99 Cauthin to Chris



#### Receipt for Caitlin Jett

Account ID: 296936420902832



Invoice/Payment Date Aug 20, 2020, 12:00 AM

Payment Method Visa\*8735 Reference Number: 5EPS9WAWJ2

Transaction ID 3259007854213505-6186531

Product Type Facebook

Paid \$26.30 USD

Ad spend since Jul 30, 2020.

#### Campaigns

Post: "We are accepting donations for our no contact"
From Jul 30, 2020, 12:00 AM to Aug 18, 2020, 11:59 PM
Post: "We are accepting donations for our no contact"
Post: "On Saturday, July 25, Sheriff Ezell Brown and the"
From Jul 30, 2020, 12:00 AM to Aug 18, 2020, 11:59 PM
Post: "On Saturday, July 25, Sheriff Ezell Brown and the
Post: "Today Sheriff Ezell Brown and the Newton County"
From Jul 30, 2020, 12:00 AM to Aug 18, 2020, 11:59 PM
Post: "Today Sheriff Ezell Brown and the Newton County
Post: "Today Sheriff Ezell Brown and the Newton County"
From Jul 30, 2020, 12:00 AM to Aug 18, 2020, 11:59 PM
Post: "Today Sheriff Ezell Brown and the Newton County
Post: "Sheriff Ezell Brown and the Newton County"
From Jul 30, 2020, 12:00 AM to Aug 18, 2020, 11:59 PM
Post: "Sheriff Ezell Brown and the Newton County"
Post: "On Saturday, Aug. 1, Sheriff Ezell Brown and the"
From Jul 30, 2020, 12:00 AM to Aug 18, 2020, 11:59 PM
Post: "On Saturday, Aug. 1, Sheriff Ezell Brown and the"

	\$5.55
865 Impressions	\$5.55
	\$4.54
2,535 Impressions	\$4.54
	\$0.62
158 Impressions	\$0.62
	\$10.00
3,338 Impressions	\$10.00
	\$5.00
844 Impressions	\$5.00
	\$0.59
95 Impressions	\$0.59

Please find attached my statement for an item charged in error on my Pcard. Unfortunately, I have 3 debit cards that are the exact same color and very similar in design.

(documentation attached) At the time I provided the card number for payment, I was unaware this was the County Pcard. I was only made aware once the statement came in. With that being said, I have attached a check for reimbursement to cover the payment. Since this error, I have written Newton County at the top of my Pcard to immediately identify it.

Sincerely,

Ezell Brown

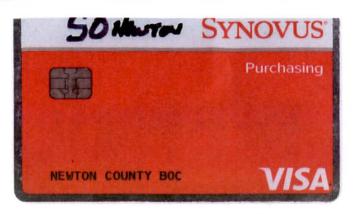
Sheriff of Newton Cou

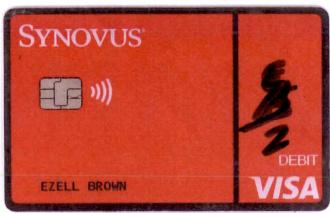
Tage, the attached stakement goes with the PCArd error. Also contact the Phone I listed to

get the receipt.

Theoret was not sent

Receipt well be emailed to contact on file. bbarch@newton







1 11

### Merchant: MARQUIS WHOS WHO VENTURES LLC

100 Connell Drive

Suite 2300

Berkeley Heights, NJ 07922

US

908-673-0100

Order Information

Description:

Order Number: Customer ID:

P.O. Number:

Invoice Number:

6f82f1bd08af44c99c10

Billing Information

Ezell Brown Newton County Sheriff's Office 1124 Clark Street

Covington, GA 30014 United States Shipping Information

Shipping:

0.00

Tax:

0.00

Total: USD 989.00

Payment Information

Date/Time:

24-Aug-2020 12:23:31 EDT

Transaction ID:

62522945230

Transaction Type:

Authorization w/ Auto Capture

Transaction Status:

Settled Successfully

Authorization Code:

002560

Payment Method:

Visa XXXX8735



#### INVOICE



Adobe Inc. 345 Park Ave San Jose, CA 95110

Bill To: Ezell Brown 1113 Usher Street NW GA 30014 Reprint Page 1 of 1

Invoice Number: 1254679631 Invoice Date: SEP-05-20 Payment Terms: Credit Card **Due Date:** SEP-12-20 Purchase Order: ADB054194120 **Contract No** 00004490 Order Number: 5030039799 Order Date: MAR-05-19 **Customer No.:** 1452233 Bill to No. 554408097

Adobe Contact Information:

https://helpx.adobe.com/contact.html

Line No	Material No / Description	UOM	Unit Price	Qty	Extended Price
000010	65232730	EA	14.99	1	14.99
	Acrobat Pro Subs CC ALL MLP DSP Ret Inv 01 mnth MUN	1 YR			

North America	Invoice Totals
	S & H Sales Tax Currency Qty Shipped Invoice To
	0.00 0.00 USD 1 14

Comments:



Print

Billing Activity - Invoices

**Newton County BOC** Attn: Ezell Brown

15151 Alcovy-Jersey Road, V.E. Covington GA 30014

P: 678-625-1437

1154 Clark St SW

Date

00.24\$

Charge Amount Credit Amount

09/16/2020 Invoice #302495926

Billing questions? Contact Support
Constant Contact - 1601 Trapelo Road - Waltham, MA 02451 US

Description

Invoices from 08/17/2020 to 09/16/2020

User Name: abarnes@newtonsheriffsa.ovg

#### INVOICE



Line No

Comments:

Adobe Inc. 345 Park Ave San Jose, CA 95110

Bill To: Ezell Brown 1113 Usher St NW Covington GA 30014

**Material No / Description** 

Reprint

Page 1 of 1

Invoice Number: 1258767745
Invoice Date: SEP-12-20
Payment Terms: Credit Card

Due Date: SEP-19-20

 Purchase Order:
 HDD032784002

 Contract No
 00004490

 Order Number:
 5027577690

 Order Date:
 DEC-12-18

 Customer No.:
 1452233

Adobe Contact Information:

Qty

Bill to No.

**Unit Price** 

https://helpx.adobe.com/contact.html

354941511

**Extended Price** 

	material No / Description	CONTRACTOR OF THE PARTY OF THE				LAUGHUCU I INC
000010	65182902	EA		52.99	1	52.99
	Creative Cloud Indiv ALL MLP DSP Ret Inv 01 mnth ML	JN 1 YR DSP				
rth Ame	erica	Invoice Total	s			
		S & H	Sales Tax	Currency	Qty Shipped	Invoice Total

UOM

# Newton County Purchase Card Activity Log

(60	UN	FE
<b>(</b> ₹	1	10
(2)		. 90
THE PERSON NAMED IN	\#	]?)
**	7821	*

Cardholder Name	Freda K. Reed
Department	Senior Services
Last 4 Digits of Card	8081
Month	September

\*Must be completed if charge is for a meal.

		#1			<u>a nieai.</u>
Date -	. Vendor »	Description and Business Purpose of Expenditure	Total	Account Coding	Meal Attendees 5
8/19/2020	PODs of Atlanta	Monthly Rental (4 storage pods)	\$899.97	<b>327-55200-52232</b> 0	S1705
9/4/2020	Webstaurant	Kitchen Equipment	\$850.50	327-55200-522320	541310 S1705
9/12/2020	Webstaurant	Trash Bins, Cans and Luch Boxes	\$717.37	100-55200-531100	
9/11/2020	Webstaurant	Kitchen Equipment	\$917.0 <b>1</b>	327-55200-522320	541310 s1705
8					

Statement Total: \$3,384.85

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Cardholder Signature

Approval Signature (Department Head, Elected Official, or County Manager)

## **YNOVUS<sup>®</sup>**

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

Account NumberXXXX-XXXX-XXXX-8081

Payment Due N/A New Balance Minimum Payment N/A

**CARD SERVICES** P.O. BOX 2181 **COLUMBUS GA 31902-2181** 

**FREDA K REED NEWTON COUNTY BOC** 1113 USHER ST NW **COVINGTON GA 30014-2469**  \*\* 0000000

762001048081

000000000

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Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

#### Visa Account Summary

XXXX-XXXX-XXXX-8081 Account Number Statement Closing Date September 15, 2020 \$5,000.00 Credit Line Available Credit N/A N/A Minimum Payment Payment Due Date N/A

#### Balance Summary

Previous Balance N/A \$0.00 Credits Purchases and Debits \$3,384.85 Cash Advances \$0.00 FINANCE CHARGE N/A New Balance N/A

#### Important Contact Information

(See reverse side for billing and other Important information)

Payment Address:

Pay Online:

TTY Telephone:

Card Services

P.O. Box 2181

Columbus, GA 31902-2181

1-877-254-3568

www.commerclalcardview.com

Customer Inquiries Address:

Commercial Customer Support P.O. Box 23061

Columbus, GA 31902-3061

1-888-SYNOVUS (796-6887) **Customer Service:** 

#### Transaction Detail

Trans Date	Post Date	Description	Purchase Order No.	Amount
08/19	08/20	PODS OF ATLANTA NE 800-7767637 GA	023217791822	\$199.99
08/19	08/20	PODS OF ATLANTA NE 800-7767637 GA	023234095310	\$199.99
08/19	08/20	PODS OF ATLANTA NE 800-7767637 GA	023234104252	\$199.9 <b>9</b>
08/19	08/20	PODS OF ATLANTA NE 800-7767637 GA	023234094996	\$300.00
09/04	09/07	THE WEBSTAURANT STORE 717-392-7472 PA	56537561	\$850.50
09/12	09/14	THE WEBSTAURANT STORE 717-392-7472 PA	56857785	<b>\$717.37</b>
09/11	09/14	THE WEBSTAURANT STORE 717-392-7472 PA	56539585	\$917.01

## SYNOVUS<sup>®</sup>



PODS Enterprises, LLC PO Box 791003 Baltimore, MD 21279-1003

#### THANK YOU FOR CHOOSING PODS!

**Newton County Board of Commissioners** Attn: Freda Reed 6183 Turner Lake Rd NW Covington, GA 30014-2063

#### Statement No.

ATLN-CS1006511

**Customer Account** Statement Date

139595410 8/18/2020

Statement Period

7/19/2020-8/18/2020

Due Date

8/18/2020

1 of 2

N	lee	d	to	Col	ntad	ct	Us	?

Page

Our Business Team is available Monday - Friday, 8:00am - 9:00pm Saturday 9:00am - 5:30pm EST. You can reach us by Phone at 1-855-886-6962 or by email at Businessteam@PODS.com

Account Sum	пагу	
Period Dates: 7/19/202	0 - 8/18/2	020
Previous Balance	\$	899.97
Payments Applied	\$	(899.97)
Unapplied Payments	\$	0.00
Payment Adjustments	\$	0.00
Account Adjustments	\$	0.00
New Charges	\$	899.97
Amount Due	\$	899.97

#### We want you to know

PODS appreciates your business. Check out PODS' new website dedicated to our commercial accounts.

Visit Business.PODS.com to get a quote for your next business move or storage need.

For service or invoice-related questions, check out our new Frequently Asked Questions page at Business.PODS.com/FAQs

#### **Payment Options**



To pay by phone: Call us at 1-800-776-7637



To pay online: Visit our site at Business.PODS.com /my-account



To pay by mail: Use pre-addressed remittance below.

139595410

8/18/2020

899.97

Call customer service to sign up for AutoPay using your credit card or bank account.

•	- 34		٠
	σ	•	

\*\*\* To Ensure Proper Credit, Please Detach This Remittance and Return With your Payment \*\*\*



PODS Enterprises, LLC PO Box 791003 Baltimore, MD 21279-1003 **Newton County Board of Commissioners** Attn: Freda Reed 6183 Turner Lake Rd NW Covington, GA 30014-2063

Customer account number

**Amount Due** 

**Due Date** 

tatement	No.	

ATLN-CS1006511

Total	Amount Enclosed

Make checks payable to: **PODS Enterprises, LLC** 

1395954104ATLN-CS1006511000899976



PODS Enterprises, LLC PO Box 791003 Baltimore, MD 21279-1003

#### THANK YOU FOR CHOOSING PODS!

Statement No.

ATLN-CS1006511

Customer Account Statement Date Statement Period 139595410 8/18/2020 7/19/2020-8/18/2020

8/18/2020

Due Date

Page 2 of 2

#### New Charges - Transaction Summary

Account: 139595410-Newton County Board of Commissioners

PO #:		Amount	Tax	Total
Container Rental Fees	\$	859.97	\$ 0.00	
Container/Content Protection Fees	\$	40.00	\$ 0.00	\$ 40.00
	O Subtotal: \$	899.97	φ υ.υυ	\$ 899.97

Invoice Total: \$

899.97 \$

0.00 \$

899.97

899.97

#### **New Charges - Transaction Detail**

Account: 139595410-Newton County Board of Commissioners

Account #: 139595410 Newton County Board of Commissioners		PO#:		Qty	Price	Disco	unt	,	Amount	Tax	Total
Container#: CP265006 Inv# ATLN000121282	Order#: 2049872	Monthly Rental of Container in Storage Center 2110 Lawrence Ave, Ste 100, Atlanta, GA 30344-1736	7/23/20-8/22/20	1	\$ 300.00	\$	10.00	\$	290,00	\$ 0.00	\$ 290.00
Container#: CP265006 Inv# ATLN000121282	Order#: 2049872	Container Only Protection Option - Monthly Fee	7/23/20-8/22/20	1	\$ 10.00	\$	0.00	\$	10,00	\$ 0,00	\$ 10.00
Container#: 8136B120 Inv# ATLN000121519	Order#: 2053495	Monthly Rental of Container in Storage Center 2110 Lewrence Ave, Ste 100, Atlanta, GA 30344-1736	7/28/20-8/25/20	1	\$ 189.99	\$	0.00	\$	189.99	\$ 0.00	\$ 189,99
Container#: 8136B120 Inv# ATLN000121519	Order#: 2053495	Container Only Protection Option - Monthly Fee	7/26/20-8/25/20	1	\$ 10.00	\$	0.00	\$	10.00	\$ 0.00	\$ 10.00
Container#: 8411B29 Inv# ATLN000121985	Order#: 2053495	Monihly Rental of Container in Storage Center 2110 Lawrence Ave, Ste 100, Atlanta, GA 30344-1736	7/30/20-8/29/20	1	\$ 189.99	\$	0.00	\$	189.99	\$ 0.00	\$ 189.99
Container#: 8411B29 Inv# ATLN000121985	Order #: 2053495	Container Only Protection Option - Monthly Fee	7/30/20-8/29/20	1	\$ 10.00	\$	0.00	\$	10.00	\$ 0.00	\$ 10.00
Container#: 101761BX Inv# ATLN000122011	Order #: 206†425	Monthly Rental of Container in Storage Center 2110 Lawrence Ave, Ste 100, Atlante, GA 30344-1736	7/30/20-8/29/20	1	\$ 189,99	\$	0.00	\$	189.99	\$ 0,00	\$ 189.99
Container#: 101761BX inv# ATLN000122011	Order #: 2081425	Container Only Protection Option - Monthly Fee	7/30/20-8/29/20	1	\$ 10.00	\$	0.00	\$	10.00	\$ 0.00	\$ 10.00
		1				Şul	total:	\$	899.97	\$ 0.00	\$ 899,97

Invoice Total: \$ 899.97 \$ 0.00 \$

#### **Account Activity Details**

Payment Information	Applied To	Am	ount Applied	Payment Amount
Credit Card, 8081	<u> </u>		\$	(300.00
•	ATLN000118673	\$	300.00	
Credit Card, 8081		_	\$	(199.9)
	ATLN000118936	\$	199.99	
Credit Card, 8081			400.00	(199.99
	ATLN000119415	\$	199.99	// 00 0
Credit Card, 8081	ATT 110504 40000		400.00	(199.9
	A1LN000119388	Þ		(899.97
	•	Credit Card, 8081 ATLN000118936  Credit Card, 8081 ATLN000119315	Credit Card, 8081 ATLN000118936 \$  Credit Card, 8081 ATLN000118936 \$  Credit Card, 8081 ATLN000119415 \$	ATLN000118673 \$ 300.00 \$ Credit Card, 8081

### WebstaurantStore

Sales Invoice

 Order Number
 User ID
 Date Ordered

 56537561
 14238325
 9/3/20 at 1:19 PM

Bill To

Ship To

Shipping Method

Freda Reed

Newton County Senior Services 6183 Turner Lake Road Covington, GA 30014 Freda Reed

Newton County Senior Services 6183 Turner Lake Road Covington, GA 30014-3059 **Common Carrier** 

Yo	our Contact		Customer PO	C	ustomer Pho	one
help@we	ebstaurantstore.com		<u> </u>		770-784-2174	1
Item Number		Description		Unit Price	QTY	Total
109APR1820L	Regency 20 Pan En	nd Load Bun / Sheet Pan Casters - Unassembled	n Rack with Non-Marking d	\$109.99	1	\$109.99
38480527	Lifetime	Chair Dolly	\$86.99	1	\$86.99	
407RCFULL8M	Regency 63" Clear 8	ency 63" Clear 8 Mil Full-Size Plastic Bun Pan Rack Cover with 3 Zippers			3	\$49.20
600CANRK162M	Regency CANRK162M	Full Size Mobile Alumini #5 Cans	um Can Rack for #10 and	\$398.9 <del>9</del>	1	\$398.99
					SubTotal: Tax: Shipping: Liftgate:	\$645.17 \$0.00 \$160.33 \$45.00
Payment Method: Visa - XXXX	K8081			To	otal (USD):	\$850.50

Thank you for your business!

**WebstaurantStore** 

42 Industrial Circle Attn: Returns Department, Door #21 Lancaster, PA 17601 717-392-7472

### WebstaurantStore

Sales Invoice

Order Number	User ID	Date Ordered
<b>5653</b> 9585	14238325	9/3/20 at 1:48 PM

Bill To

Ship To

Shipping Method

Freda Reed

Newton County Senior Services 6183 Turner Lake Road Covington, GA 30014 Freda Reed

Newton County Senior Services 6183 Turner Lake Road Covington, GA 30014-3059 Common Carrier

You	ur Contact	Customer PO	C	ustomer Pho	one
help@wel	bstaurantstore.com			770-784-2174	
Item Number	Descrip	otion	Unit Price	QTY	Total
384RA3060MBR	Correll RA306024 R-Series 30" x 6 Adjustable Height		<b>\$126.49</b>	6	\$758.94
				SubTotal: Tax: Shipping:	\$758.94 \$0.00 \$113.07 \$45.00
		Call E	Before Delivery	Liftgate: Requested	<b>\$45.00</b>
Payment Method: Visa - XXXX	(8081		. То	otal (USD):	\$917.01

Thank you for your business!

**WebstaurantStore** 

42 Industrial Circle Attn: Returns Department, Door #21 Lancaster, PA 17601 717-392-7472

### WebstaurantStore

Sales Invoice

Order Number	User ID	Date Ordered
56857785	14238325	9/11/20 at 2:51 PM

Bill To

Ship To

Shipping Method

Freda Reed

Newton County Senior Services 6183 Turner Lake Road Covington, GA 30014 Freda Reed

Newton County Senior Services 6183 Turner Lake Road Covington, GA 30014-3059 Common Carrier

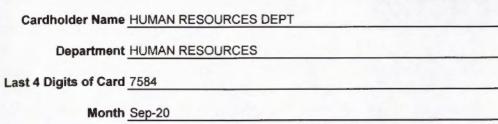
	ur Contact	Customer PO	Cı	ıstomer Pho	
help@we	bstaurantstore.com			770-784-2174	
Item Number	Descrip	tion	Unit Price	QTY	Total
349TRASHN32	Lancaster Table & Seating Waste 32 Ga with Drop Hole an		\$1 <del>6</del> 4.99	2	\$329. <del>9</del> 8
475TCRND32BK	Lavex Janitorial 32 Gallon Black Ro	ound Commercial Trash Can	\$16. <del>99</del>	2	\$33.98
795BARN975WH	9 1/16" x 7 1/16" x 5" White Barn Take 125/Cas		\$47.69	3	\$143.07
				SubTotal: Tax: Shipping: Liftgate:	\$507.03 \$0.00 \$165.34 \$45.00
Payment Method: Visa - XXX	X8081		То	tal (USD):	\$717.37

Thank you for your business!

#### **WebstaurantStore**

42 Industrial Circle Attn: Returns Department, Door #21 Lancaster, PA 17601 717-392-7472

#### **Newton County Purchase Card Activity Log**





\*Must be completed if charge is for a meal.

Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
8/28/2020	GA PRIMA	Pamela Maxwell Renewal	\$ 50.00	25015400-523600 Dues and Fees- Risk	
9/8/2020	The UPS Store	Postage for Letter To Gregory Womack	\$10.32	10015400-523230 Postage	
9/10/2020	Wheeler Cleaners	Dryclean HR Shirt/Jacket	\$15.50	10015400-531100-General Operating Supplies	- device
9/10/2020	USPS	Postage for Letter to Gregory Womack	\$16.00	10015400-523230 Postage	

Statement Total:

\$91.82

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Cardholder Signature

Approval Signature (Department Head, Elected Official, or County Manager)

N/A

## SYNOVUS<sup>®</sup>

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

> CARD SERVICES P.O. BOX 2181 COLUMBUS GA 31902-2181

CARD SERVICES

Account NumberXXXX-XXXX-XXXX-7584

Payment Due

New Balance N/A

Minimum Payment N/A

HUMAN RESOURCES DEPT NEWTON COUNTY BOC STE 204 1113 USHER ST NW COVINGTON GA 30014-2471 \*\* 0000000

762001247584

000000000

000000000

Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

#### Visa Account Summary

Account Number XXXX-XXXX-7584
Statement Closing Date September 15, 2020
Credit Line \$5,000.00
Available Credit N/A
Minimum Payment N/A
Payment Due Date XXXX-XXXX-7584
September 15, 2020
September 15, 2020
N/A

#### Balance Summary

 Previous Balance
 N/A

 Credits
 \$0.00

 Purchases and Debits
 \$91.82

 Cash Advances
 \$0.00

 FINANCE CHARGE
 N/A

 New Balance
 N/A

#### Important Contact Information

(See reverse side for billing and other important information)

Payment Address:

Card Services P.O. Box 2181

Columbus, GA 31902-2181

www.commercialcardview.com

Pay Online: TTY Telephone:

1-877-254-3568

Customer Inquiries Address:

Commercial Customer Support

P.O. Box 23061

Columbus, GA 31902-3061

Customer Service:

1-888-SYNOVUS (796-6887)

#### Transaction Detail

Trans Date	Post Date	Description	Purchase Order No.	Amount
08/28	08/31	GEORGIA PRIMA HTTPSWWW.GAPR GA	opsntv2x1jfgqfe	\$50.00
09/08	09/09	THE UPS STORE 6787 770-8763288 GA	V6787-29200908163	\$10.32
09/10	09/11	WHEELER S CLEANERS COVINGTON GA		\$15.50
09/10	09/11	USPS PO 1221450219 COVINGTON GA	None	\$16.00



#### From:

**GAPRIMA** Attn: Deshonda Howard 1120 Dahlonega Hwy Cumming, GA 33040

#### Receipt:

Transaction ID:

1598641387045

Payment Method: Credit Card

Date:

August 28, 2020

Time:

3:03 PM

Employer:

**Newton County Board of Commissioners** 

Billing Name:

Pamela Maxwell

Billing Address:

1113 Usher Street

Suite 203

Covington, Georgia 30014 Phone: (678) 625-1243 pmaxwell@co.newton.ga.us

Note:

for registration and renewal payments

#### **Transaction Details:**

Name	Туре	Year	Level	Price	Sub Total
Pamela Maxwell	Renewal	2020	Government Member	\$50.00	\$50.00
Totals:				\$50.00	\$50.00

Thank you. Please refer to our Payment Policy for information regarding cancellations or refunds.

A completed IRS W-9 form is available here.

#### Shipment Receipt: Page #1 of 1

THIS IS NOT A SHIPPING LABEL. PLEASE SAVE FOR YOUR RECORDS.

SHIP DATE: TUES 8 SEP 2020 UPS GROUND RESIDENTIAL 0 16 5.3 oz actuml wt EXPECTED DELIVERY DATE:
WED 9 SEP 2020 EOD
SHIP FROM:
MALISSA DAVIS
113 USHER ST
COUINGTON GA 30014 1.00 lb billable wt 15.88X12.88X8.75 IN TRACKING NUMBER: 1237N5960359909341
SHIPHENT ID: HM97KCDX9CU32
SHIP REF 1: - SHIP REF 2: - -

TOTAL \$18.32

Everyone needs a helping hand now and then. Join our FREE email program

FOR GREAT OFFERS AND RESOURCES VISIT HAM. THEUPSSTORE. COM/EMAIL

SHIPMENTID: MM97KCDX9CU32

Powered by iShip(r) 89/88/2828 89:36 AM Pacific Time M



The UPS Store #6787 3142 Highway 278 NW Covington, GA 30014-2304 770-876-3288

Terminal....: POS6787A

Shipping/Other Charges Total tax

Employee...: 107667 Cashier's Name Kendell ITEM NAME 1.0 \$10.32 00.08 and Senting the services Migented designed communication MM97KCDX9CU32 Tracking Number - 1237V5960359909341

22 19 1 2 2 1/2 1 1 1 1 2 5

\$10.32

\$10.32

Total Cards

for Returns, Refunds or Exchanges. US Postal Rates Are Subject to Surcharge.

-----Items Designated NR are NOT aligible



अभागात मानुस्त में प्रभावत View The UPS Store. Inc.'s privacy notice at https://www.theupsstore.com/privacy-policy

UISA *******	***7584 044785
09/08/2020	
	12:38 PM
LID	756118240001
	Purchase
VISA CREDIT	XXXXXXXXXXXXX7584
Entry Mode	Chip
CUN	SIGN
Invoice	0010014226
Clerk	10766
Response	D. 16 C. 16 T. 10 C. 10
Auth Code	
	044785
MODE	ENV DETAILS
11 Table 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CHIP
AID	A000000031010
TUR	8080008000
IAD	06010A03A08000
TSI	6800
ARC	
Anount	IICD #10 20

\*\*\* CUSTONER COPY \*\*\*

HUMAN RESOURCES DEPT /

#### Parcel Shipping Order (PSO) Terms and Conditions

The UPS Store #6787

SHIP DATE SHIPMENT INFORMATION  Tue 08 Sep 2020  UPS Ground Res: 1 package Total Declared Value: Not provided		1 package	DOCUME	ON OF GOODS ENTS	
MALISSA DAVIS 113 USHER ST Covington, GA 300 Tel: (678) 625-1239		MR GREG WOMACK 15 RIVERBROOKE TRL COVINGTON, GA 30016-5602		PKG TRACKING NUMBER  1 1Z37W5960359909341	DECL VAL N/A

Subject to these terms and conditions, this The UPS Store® center ("We", "Us", or "Our") will receive, forward and/or pack parcels for you the customer ("You" or "Your"). The carrier for Your parcel(s) accepted by Us ("Carrier") will be UPS®. The Carrier may refuse to ship Your parcel(s) accepted by Us. You represent Your true name and address appear as sender above.

We do not accept hazardous material, Other Regulated Material-D class (ORM-D), illegal items or articles of unusual value, including but not limited to cash. In addition, the Carrier's tariff, service guide, or terms and conditions ("Carrier's Terms and Conditions") may apecify other restricted items. Certified locations may accept some forms of ORM-D. Parcels containing "food" (as defined in section 201 (f) of the Federal Food, Drug, and Cosmetic Act), will be accepted for transportation only according to the applicable terms and conditions in the Carrier's Terms and Conditions in effect on the date of shipment.

We do not transport Your parcel(s). The Carrier transports Your parcel(s) subject to the UPS/Tariff Terms and Conditions of Service ("UPS Terms") in effect on the date of shipment, which are available at <a href="https://www.ups.com/terms">www.ups.com/terms</a>. The Carrier's Terms and Conditions set forth the Carrier's rights, responsibilities, and limitations of liability with respect to the transportation of Your parcel(s) and are hereby incorporated in full into this PSO. The UPS Terms contain a MANDATORY BINDING ARBITRATION CLAUSE AND CLASS ACTION WAIVER, which apply to any controversy or claim, whether at law or equity, arising out of or relating to provision of services by UPS, regardless of the date of accrual of such dispute, except for claims that may be filed in courts of limited jurisdiction such as small claims, justice of the peace, magistrate court, and similar courts with monetary limits on their jurisdictions over civil disputes.

We are Your agent for receiving and forwarding Your parcel(s) to the Carrier. We are not the Carrier's agent. You agree that We will be deemed the shipper of Your parcel(s) with the Carrier and that You are not the shipper under the Carrier's Terms and Conditions. You therefore have no rights directly against the Carrier. Any rights You may have to recover damages or other compensation with respect to the transportation of Your parcel(s) (including for losa, damage, or the Carrier's failure to timely deliver) are limited to those rights described in the Carrier's Terms and Conditions or in this PSO. You agree that We, as the shipper of Your parcel(s), are solely entitled to any discounts or adjustments to the charges that We pay the Carrier for transporting Your parcel(s).

Except as expressly set forth in this PSO, We assume no liability for the delivery of Your parcel(s) or for loss or damage by any cause to the parcel(s) or their contents that occurs after We tender Your parcel(s) to the Carrier. The Carrier's driver may deliver Your parcel(s) without a signature unless You request a signature on delivery and pay any applicable charge. You agree that the Carrier is not liable for loss or damage occurring after delivery of Your parcel(s). You also agree to all terms and conditions in this PSO, including all terms and conditions related to Your participation in the optional Declared Value Program.

Any statement by Us regarding a probable date and (if applicable) time of delivery is only an estimate, and is not warranted in any manner. We are not liable for any consequential, indirect, special, incidental or punitive damages, or any loss or damage resulting from delays in shipping or delivery. Our responsibility for damage to items caused by improper packing by Us is limited to any applicable Declared Value Program or other program thet We may offer and for which You have paid any applicable charge.

Limitations of Liability and Exceptions. Our liability and the Carrier's liability for loss or damage to Your parcel(s) is strictly limited to the amounts set forth in this PSO and the Carrier's Terms and Conditions govern the Carrier's liability for loss or damage. Liability for loss or damage is limited to Your actual damages or \$100 per parcel, whichever is less, unless You declare a higher value and pay the applicable charge for a higher authorized value (under the Declared Value Program). We and the Carrier are not liable or responsible for items of unusual value, precious metals, negotiable instruments, or items prohibited from shipment, or for which the Carrier's liability is excluded, under the Carrier's Terms and Conditions. Additional terms and conditions governing loss or damage claims can be found in the Carrier's Terms

Declared Value Program. UPS offers a declared value program providing declared value limits for loss or damage, subject to terms and conditions (including monetary limits) ("Declared Value Program"). The declared value product will be available only if You have complied with all terms and conditions of the applicable Declared Value Program. We surcharge the cost of this product. If You elect to participate in the Declared Value Program and You pay any applicable charge, We will declare value for Your eligible parcel(s) through the Carrier. You expressly acknowledge that the value of each parcel does not exceed the amount You declared as the "Declared Value". If You do not declare a Value, You agree that the value of each parcel does not exceed \$100. If You do not declare a value above \$100 and pay an additional charge for a parcel containing items of greater value than \$100, You will not be entitled to recover more than \$100 for loss or damage to the items in that parcel. The Carrier's terms and conditions, including monetary limits, for its Declared Value Program are located in the Carrier's Terms and Conditions.

Claims Filed Through Us. If You or the consignee has a claim for loss or damage to Your parcel(s) under the Declared Value Program, You agree to make the claim through Us. If You make such claim through Us, We will submit a claim to the Carrier as the shipper of the parcels, and We will remit to You any recovery on the claim paid to Us by the Carrier for Your parcel(s). You expressly agree that We have no liability if any claim is denied or paid only in part by the Carrier or other declared value. In the event You make a Guaranteed Service Refund (GSR) request to UPS, You agree to provide to UPS (and hereby authorize Us to provide to UPS) Your name and address to be used by UPS to process the request.

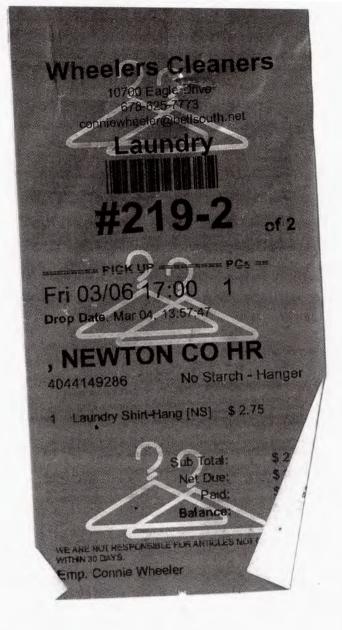
Filing a Claim under the Declared Value Program. Any and all claims under any Declared Value Program must be in writing and received by Us within the Carrier's required time frame as set for in the Carrier's Terms and Conditions. Claims not made within the prescribed time frame are waived and will not be paid. For all damage claims, the original packaging materials must be made available for the Carrier's inspection prior to reshipment. All claims for loss or damage must be supported by the shipping documents, including but not limited to this PSO and a copy of the shipment receipt, and proof of the value of the lost or damaged items for any declaration of value over \$100.

Filing a UPS Guaranteed Service Refund (GSR) request, If UPS is the Carrier for Your parcel(s), if You believe any parcel is eligible for a refund under the UPS Service Guarantee as set forth in the UPS Terms, You must contact Us at the location that shipped the parcel(s) within 15 calendar days of the date of scheduled delivery. If You do not contact Us within the prescribed time frame, any claim to a refund under the UPS Service Guarantee is waived and will not be paid.

We are an independently owned and operated franchise of The UPS Store, Inc. and solely responsible for all aspects of Our operations. We are the exclusive employer of all employees of Our business. You acknowledge and agree that The UPS Store, Inc. is not liable for any of Our acts or omissions and is not the employer of the employees of Our business. This PSO constitutes the entire agreement between You and Us, and supersedes all prior, subsequent and comemporaneous agreements, understandings, and representations, written or oral, relating to the subject matter hereof.

By signing below, You acknowledge that (i) You confirm the Ship to Address is accurate for each parcel (ii) You confirm the Declared Value for each parcel, if any, is correct (iii) You have read and reviewed the terms and conditions described above in their entirety, (iv) You agree to be bound by all such terms and conditions, and (v) by so signing, this PSO constitutes binding and enforceable obligations of You. YOU FURTHER ACKNOWLEDGE AND AGREE that, except as expressly set forth in the UPS Terms, any claims against Us or UPS (including its affiliates) arising out of or relating to provision of service by UPS are subject to individual, mandatory binding arbitration, as set forth in the UPS Terms available at <a href="https://www.ups.com/terms">www.ups.com/terms</a>.

	Tue 8 Sep 2020
CUSTOMER SIGNATURE	TRANSACTION DATE



WHEELER'S CLEANERS 10700 EAGLE DR COVINGTON, GA 30014 678-625-7773

09/10/2020

Card #

11:29:30

CREDIT CARD

VISA SALE

XXXXXXXXXXXX7584 Chip Card: VISA CREDIT AID: A0000000031010 SEQ #: Batch #: Trans #: Approval Code: 039981 TRANS ID: 380254557833034 Entry Method: Chip Read Mode: Issuer Tax Amount: \$0.00

SALE AMOUNT \$15.50

> FOR YOUR BUSINESS CUSTOMER COPY

THANK YOU





COVINGTON 2131 STALLINGS ST NW COVINGTON, GA 30014-9998 (800)275-8777

(	800) 275-8	B777	
09/10/2020			04:31 PM
Product	Qty	Unit Price	Price
PM 2-Day Window FR Env	1	11100	\$7.75
Covington, GA	30016	1	
Expected Deli Monday 09/14/	very Day 2020		11
USPS Tracking 9505 5105 707	2 0254 2	965 20	)
Insurance			\$0.00
Total to \$50.00	included		\$7.75
PM 2-Day	1		\$8.25
Covington, GA			******
Expected Deli	very Day	-	
Monday 09/14/ USPS Tracking			
9505 5105 707 Insurance	3 0254 2	865 47	\$0.00
Up to \$50.00	included		
Total			\$8.25
Grand Total:	-	11 00 00 00 00	\$16.00
Credit Card Remit	td		\$16.00
Card Name: VIS Account #: XXX		V7594	
Approval #:05	52539	A/J04	
Transaction (		r	chip
AL: VISA CRED	IT		1119
PIN:Not Requi			

Due to limited transportation availability as a result of nationwide COVID-19 impacts package delivery times may be extended. Priority Mail Express@ service will not change.

# NEWTON COUNTY PURCHASING CARD ACTIVITY LOG

CARDHOLDER NAME:	James Brown	DEPARTMENT:	Cornish Creek
CARD ACCOUNT #:	5239		
FOR THE MONTH'S OF:	Aug-20		

					A COCOLINIT AND IN ADED
LINE	DATE	VENDOR NAME	ITEM DESCRIPTION	TOTAL	
1	8/17/2020	American Water Works Ass.	Membership renewal for J Brown	\$245.00	523600
2	8/18/2020	American Water Works Ass.	Membership renewal for D Singleton	\$245.00	523600
3	8/19/2020	Johnny's Pizza	Meeting-Water System Strategic Plan	\$34.85	531300
4	9/8/2020	Ingles	Supplies for Luncheon	\$50.53	531300
5					4
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
			OVERALL TOTAL	\$575.38	

I hereby confirm that all purchases stated above follow all purchasing card policies and procedures.

Cardholder Signature

Approval Signature (LIAISON, DEPT HEAD, ELECTED OFFICIAL)

P.O. BOX 23061 COLUMBUS GA 31902-3061

Account NumberXXXX-XXXX-5239 N/A

Payment Due

New Balance N/A

Minimum Payment

CARD

N/A

JAMES BROWN **NEWTON COUNTY BOC STE 204** 1113 USHER ST NW **COVINGTON GA 30014-2471** 

**CARD SERVICES** 

P.O. BOX 2181

COLUMBUS GA 31902-2181

\*\* 0000000

762000365239

000000000

00000000

Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

#### Visa Account Summary

XXXX-XXXX-XXXX-5239 Account Number Statement Closing Date September 15, 2020 Credit Line \$5,000.00 Available Credit N/A Minimum Payment N/A Payment Due Date N/A

#### **Balance Summary**

Previous Balance N/A Credits \$0.00 Purchases and Debits \$575.48 \$0.00 Cash Advances **FINANCE CHARGE** N/A New Balance N/A

#### Important Contact Information

(See reverse side for billing and other important information)

Payment Address:

Card Services

P.O. Box 2181

Columbus, GA 31902-2181

www.commercialcardview.com

Pay Online: TTY Telephone:

1-877-254-3568

Customer Inquiries Address:

Commercial Customer Support

P.O. Box 23061

Columbus, GA 31902-3061

**Customer Service:** 

1-888-SYNOVUS (796-6887)

#### Transaction Detail

Trans Date		Description	Purchase Order No.	Amount
08/19	08/19	AWWA.ORG 303-347-6197 CO	685044918	\$245.00
		************* MEMO ITEM ************************************		
08/20	08/20	AWWA.ORG 303-347-6197 CO	685045206	\$245.00
		******* MEMO ITEM *********		
08/20	08/21	JOHNNYS NEW YORK STYLE PI COVINGTON GA		\$34.95
		******** MEMO ITEM ************************************		
09/08	09/09	INGLES MARKETS #439 COVINGTON GA	00610480439VLPY7020248563	\$50.53
		************ MEMO ITEM ************************************		



TIME

:08-17-2020 09:41

FAX NO.1 NAME

FILE NO.

: 463

DATE

: 08.17 09:39

TO

: 5 913033470804

DOCUMENT PAGES

START TIME END TIME

: 08.17 09:39 : 08.17 09:41

PAGES SENT

: 2

STATUS

0K

\*\*\*SUCCESSFUL TX NOTICE\*\*\*

membershed Ronard



6666 West Quincy Avenue Denver, CO 80235-3098 USA Phone: 800.926, 7337 Outside US: 303.794,771 1 Fax: 303,347,0804 Email: service@awwa.org

արավիսակությունի արևարդությունը արդիկան արգան #BWNCWZH
#01170636 2#
Mr. James A. Brown
Newton County Water Resources
11905 Alcovy Rd
Covington, GA 30014-1027

#### IT'S TIME TO RENEW!

Dedicated to the world's most important resource, AWWA champions water knowledge, treatment and informed regulations. Through membership AWWA provides solutions to improve public health, protect the environment, sustain the economy and enhance quality of life. Together we are creating a better world through better water.

#### FIRST MEMBERSHIP RENEWAL NOTICE

Thank you for your continued support. Please verify your contact information and return all pages of this notice with your payment. Find ways to grow professionally at <a href="mailto:awwa.org/getinvolved">awwa.org/getinvolved</a>.

#### MEMBERSHIP DUES

#### MEMBERSHIP TERM 11/01/2020 - 10/31/2021 MEMBER NUMBER: DATE: ORDER NUMBER: PO NUMBER: DUE DATE: TOTAL DUES: 07/23/2020 7001832762 61203 01170636 10/11/2020 \$245.00

#### FOUR EASY WAYS TO RENEW

Be sure to mail or fax all page of this form along with your payment.

Mail: American Water Works Association PO Box 972997, Dallas, TX 75397-2997

Online: www.awwa.org/renew

.= Fax: 303.347.0804

Phone: 800.926.7337 or 303.794.7711 Hours: Mon-Fri 8am-5pm MT

Check (US funds only)

Card No: 47/5 5320 0036 Expiration Date: 11/20 Signature:

M. American Water Works Association







11905 Alcovy Rd

Covington, GA 30014-1027

Dedicated to the World's Most Important Resource®

6666 West Quincy Avenue Denver, CO 80235-3098 USA Phone: 800.926.7337

Fax: 303.347.0804

Outside US: 303.794.7711 Email: service@awwa.org

#### IT'S TIME TO RENEW!

Dedicated to the world's most important resource, AWWA champions water knowledge, treatment and informed regulations. Through membership AWWA provides solutions to improve public health, protect the environment, sustain the economy and enhance quality of life. Together we are creating a better world through better water.

563 T3 P1 նիՈՍՈՍՈւյիՈրելՈւյլՈրուգոնգերիոլՈՐՈՐՈՐՈՐՈՐՈ #BWNCWZH #01170636 Mr. James A. Brown **Newton County Water Resources** 

#### FIRST MEMBERSHIP RENEWAL NOTICE

Thank you for your continued support. Please verify your contact information and return all pages of this notice with your payment. Find ways to grow professionally at awwa.org/getinvolved.

#### MEMBERSHIP DUES

#### MEMBERSHIP TERM 11/01/2020 - 10/31/2021

DATE:	ORDER NUMBER:	MEMBER NUMBER:	PO NUMBER:	DUE DATE:	TOTAL DUES:
07/23/2020	7001832762	01170636	61703	10/11/2020	\$245.00

#### **FOUR EASY WAYS TO RENEW**

Be sure to mail or fax all page of this form along with your payment.

Mail: American Water Works Association PO Box 972997, Dallas, TX 75397-2997

Online: www.awwa.org/renew

Fax: 303.347.0804

Phone: 800.926.7337 or 303.794.7711 Hours: Mon-Fri 8am-5pm MT

☐ Check (US funds only)

☐ MasterCard ☐ American Express ☐ Discover Card Visa

Card No: 47/5 5320 0036 5239

Expiration Date: 11/20 Signature:







#### ANNUAL UPDATE REQUIRED

Please make any corrections to your information below. Mr. James A. Brown 2. What one business activity best describes your company? (Please select only one) Director of Water Resources A Public Water Supply Utility-Municipally owned ☐ B Public Water Supply Utility—Investor owned **Newton County Water Resources** C Government-Federal, State, Local 11905 Alcovy Rd D Consulting Firm ☐ E Contractor Covington GA 30014-1027 F Private Industrial System or Water Wholesaler Home Phone: ☐ G Manufacturer of Equipment & Supplies (including representatives) Business Phone: H Distributor of Equipment & Supplies (including representatives) Email: jabrown@co.newton.ga.us Educational Institutions (faculty & students), Libraries and other related organizations ☐ 」 Fully Retired ☐ K Research Lab ☐ L Other allied to the field (please specify) 3. What one category best describes your company's field served/principal activity? (Please select only one) 9 Both Water Supply and Wastewater 5 Water Supply Only 7 Wastewater Only 3 Other 4. What one category best describes your job title? (Please select only one) 1. What areas of the water and wastewater industry are of current interest to A Executive (General Manager, Commissioner, Board Member, you? (Please select all that apply) City Manager, Municipal Superintendent, Mayor, President, Public Health Advanced Water Treatment/Reuse Vice President, Owner, Partner, Director, etc.) **6 b** Asset Management Public Info./Communications B Management/Non-Engineering (Division Head, Section Head, Manager, Automation & Control Regulatory Issues Department Head, Comptroller, etc.) Ø Backflow/Cross Connection Small Systems C Design and Engineering/Both Managerial and Non-Managerial (Chief V Climate Change Source Water Engineer, Civil, Mechanical, Electrical, Environmental, or Field Engineer, Conservation/Efficiency Stormwater Planning Manager, System Designer, etc.) Training/Career Development Customer Service D Scientific/Non-Managerial (Chemist, Biologist, Biophysicist, Desalination Utility Management Researcher, Analyst, etc.) Design/Construction Wastewater Collection/Treatment ☐ E Purchasing (Purchasing Agent, Procurement Specialist, Buyer, etc.) P Distribution/Plant Ops. Water Loss F Operations (Foreman, Operator, Maintenance Crewman, Service # Drought ✓ Water Quality/Treatment Representative, etc.) M Emergency Preparedness/Security P Water Research Marketing & Sales/Non-Managerial (Market Analyst, Marketing Groundwater Y Water Resources/Planning Representative, Salesperson, Sales Representative, etc.) Innovation P Workforce Strategies Professorial (Educator, Teacher, etc.) Young Professionals Laboratory Z Other (please specify) Membrane Treatment 8-17-20 Signature MEMBERSHIP RENEWAL PAYMENT BREAKDOWN

DESCRIPTION **AMOUNT** 

AWWA - Individual Member 01-Nov-2020 to 31-Oct-2021 AWWA - Georgia Section 01-Nov-2020 to 31-Oct-2021

\$204.00 \$41.00

TOTAL

\$245.00

Dues are not deductible as charitable contributions for income tax purposes. Dues may be considered ordinary and necessary business deductions. The following is for USPS Periodical mailing requirements only. In some AWWA Sections, a portion of the Section allocated toward a subscription to that periodical. Allocation for each publication recipient authorized—Journal AWWA-\$50; Opflow-\$16. NOTE: Members' phone numbers and email addresses are protected under AWWA's Privacy Policy and are not shared with outside parties





TIME

:08-18-2020 15:01

FAX NO.1 NAME

FILE NO.

: 464

DATE

: 08.18 14:59

TO

: # 913033470804

DOCUMENT PAGES

: 2

START TIME END TIME

: 08.18 14:59

PAGES SENT

: 08.18 15:01

: 2

STATUS

: OK

\*\*\*SUCCESSFUL TX NOTICE\*\*\*

Manbushir Jarena



6666 West Quincy Avenue Denver, CO 80235-3098 USA Phone: 800.926.7-337 Outside US: 303.794.7711 Fax: 303.347.0804 Emall: service@awwa.org

ssa 73 թգ թերությունը այլիսիի իրերի ուների իրերի հետև հրանդակի #BWNCWZH #03584618 4# David Singleton 11905 Alcovy Rd Covington, GA 30014-1027

#### IT'S TIME TO RENEW!

Dedicated to the world's most important resource, AWWA champions water knowledge, treatment and informed regulations. Through membership AWWA provides solutions to improve public health, protect the environment, sustain the economy and enhance quality of life. Together we are creating a better world through better water.

#### FIRST MEMBERSHIP RENEWAL NOTICE

Thank you for your continued support. Please verify your contact information and return <u>all</u> pages of this notice with your payment. Find ways to grow professionally at <u>awwa.org/getinvolved</u>.

#### MEMBERSHIP DUES

MEMBERSHIP TERM 11/01/2020 - 10/31/2021

DATE:	ORDER NUMBER:	MEMBER NUMBER:	PO NUMBER:	DUE DATE:	TOTAL DUES:
07/23/2020	7001834222	03584618	61703	10/11/2020	\$245.00

#### FOUR EASY WAYS TO RENEW

Be sure to mail or fax all page of this form along with your payment.

 $\sim$ Mail: American Water Works Association PO Box 972997, Dallas, TX 75397-2997

Online: www.awwa.org/renew

Fax: 303.347.0804

Phone: 800.926.7337 or 303.794.7711 Hours: Mon-Fri 8am-5pm MT

☐ Check (US funds only)

☐ MasterCard ☐ American Express ☐ Discover Card

Card No: 9715 5320 0036 Expiration Date: 11/20 Signature

5239







Dedicated to the World's Most Important Resource\*

6666 West Quincy Avenue

Fax: 303.347.0804 Email: service@awwa.org

Denver, CO 80235-3098 USA Phone: 800.926.7337 Outside US: 303.794.7711

#### IT'S TIME TO RENEW!

Dedicated to the world's most important resource, AWWA champions water knowledge, treatment and informed regulations. Through membership AWWA provides solutions to improve public health, protect the environment, sustain the economy and enhance quality of life. Together we are creating a better world through better water.

562 T3 P1 լելՈՄ[ՄլեՈՄ][Մլիլի[ի]իրորիլըելիլիլիեն հեմ բանգակի #BWNCWZH #03584618 4# **David Singleton** 11905 Alcovy Rd Covington, GA 30014-1027

#### FIRST MEMBERSHIP RENEWAL NOTICE

Thank you for your continued support. Please verify your contact information and return all pages of this notice with your payment. Find ways to grow professionally at awwa.org/getinvolved.

#### MEMBERSHIP DUES

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07/23/2020	7001834222	03584618	61703	10/11/2020	\$245.00

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Be sure to mail or fax all page of this form along with your payment.

$\times$	Mail: American Water Works Association PO Box 972997, Dallas, TX 75397-2997	
	Online: www.awwa.org/renew	

Fax: 303.347.0804

Phone: 800.926.7337 or 303.794.7711 Hours: Mon-Fri 8am-5pm MT

	Check	(US funds	only)
ш	CHECK	(05 lulius	Offiny)

🕊 Visa	☐ MasterCare	d	☐ Discover Card

Card No: 4715 5320 0031 Expiration Date: 11/20 Signature:







#### **ANNUAL UPDATE REQUIRED**

Please make any corrections to your infor	mation below.		
David Singleton		2. Wha	t one business activity best describes your company? (Please select only one
Water Production Manager		A	Public Water Supply Utility-Municipally owned
Organization:		□в	Public Water Supply Utility-Investor owned
		$\square$ c	Government-Federal, State, Local
11905 Alcovy Rd			Consulting Firm
Covington GA 30014-1027		□ E	Contractor
Home Phone:		☐ F	Private Industrial System or Water Wholesaler
Business Phone: 770.784.2125			Manufacturer of Equipment & Supplies (including representatives)
			Distributor of Equipment & Supplies (including representatives)
Email: dsingleton@co.newton.ga.us			$\label{lem:educational} Educational Institutions (faculty \& students), Libraries and other related organizations$
			Fully Retired
		□ к	Research Lab
			Other allied to the field (please specify)
		3. Wha	nt one category best describes your company's field served/principal vity? (Please select only one)
		9	Both Water Supply and Wastewater
		<b>3</b> 5	Water Supply Only
		□ 7	Wastewater Only
		□ 3	Other
		4. Wha	at one category best describes your job title? (Please select only one)
What areas of the water and wastewat you? (Please select all that apply)  Advanced Water Treatment/Reuse	er industry are of current interest to  Public Health		Executive (General Manager, Commissioner, Board Member, City Manager, Municipal Superintendent, Mayor, President, Vice President, Owner, Partner, Director, etc.)
☐ Asset Management ☐ Automation & Control	☐ Public Info./Communications ☐ Regulatory Issues	<b>✓</b> B	Management/Non-Engineering (Division Head, Section Head, Manager, Department Head, Comptroller, etc.)
☐ Backflow/Cross Connection ☐ Climate Change ☐ Conservation/Efficiency	Small Systems Source Water Stormwater		Design and Engineering/Both Managerial and Non-Managerial (Chief Engineer, Civil, Mechanical, Electrical, Environmental, or Field Engineer, Planning Manager, System Designer, etc.)
☐ Customer Service ☐ Desalination	Training/Career Development Utility Management	□ D	Scientific/Non-Managerial (Chemist, Biologist, Biophysicist, Researcher, Analyst, etc.)
Design/Construction	Wastewater Collection/Treatment	□ E	Purchasing (Purchasing Agent, Procurement Specialist, Buyer, etc.)
Distribution/Plant Ops. Drought	☐ Water Loss ☐ Water Quality/Treatment		Operations (Foreman, Operator, Maintenance Crewman, Service Representative, etc.)
☐ Emergency Preparedness/Security ☐ Groundwater ☐ Innovation	Water Research Water Resources/Planning Warkforce Strategies	G	Marketing & Sales/Non-Managerial (Market Analyst, Marketing Representative, Salesperson, Sales Representative, etc.)
Laboratory	<ul><li>☐ Workforce Strategies</li><li>☐ Young Professionals</li></ul>		Professorial (Educator, Teacher, etc.)
Membrane Treatment		$\square$ z	Other (please specify)
		Signat	ure
MEMBERSHIP RENEWAL F	PAYMENT BREAKDOWN		

<u>DESCRIPTION</u> <u>AMOUNT</u>

AWWA - Individual Member 01-Nov-2020 to 31-Oct-2021 AWWA - Georgia Section 01-Nov-2020 to 31-Oct-2021 \$204.00 \$41.00

TOTAL

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# Low Prices...Love The Savings!

9176 HWY 278 NE COVINGTON, GA STORE #439 770-787-8129 STORE MANAGER: ED GLOVER YOUR CASHIER TODAY WAS SELF-CHECK #23 Grocery A LAYS SC & ONIOPC 1.98 B SC 1108 A ADV SAVINGS 1.81 2 @ 4.79 A LAYS PSZ PC 7.96 B SC 1126 A ADV SAVINGS 0.81 SC 1126 ADV SAVINGS 0.81 A LAYS BBQ PSZ PC 3.98 B SC 1126 A ADV SAVINGS 0.81 4@2.97 A WON 12CT HAM B 11.88 B A SF CARO SWT BBPC 2.88 B SC 0795 A ADV SAVINGS 0.30 A FAMOUSDAVESBBQPC 2.50 B SC 1476 A ADV SAVINGS 0.58 3 @ 2.98 A MILO'S NO.C.TE 8.94 B 3 @ 2.98 A MILO'S SWT. TEA 8.94 B ADVANTAGE CUSTOMER \*\*\*\*\*\*4949 TAX 1.47 \*\*\*\* BALANCE 50.53 \*\*\*\*\*\*\*\*\*\*\* VISA CARD - CHIP Purchase ACCT # \*\*\*\*\*\*\*\*5239 AMT: \$50.53 AID: A0000000031010 APPROVAL CODE: 028249 \*\*\*\*\*\*\*\*\*\*\* VISA 50.53 CHANGE 0.00 TOTAL NUMBER OF ITEMS SOLD = 16 -----INGLES SAVINGS-----YEAR TO DATE SAVINGS: ADVANTAGE & STORE COUPONS \$5.12 TOTAL SAVINGS \$5.12

-----INGLES SAVINGS-----

09/08/20 12:07 439 23 41 423

Customer Copy

Johnny's New York Style Pizza

Johnny's Pizza 10176 Carlin Drive Covington, GA 30014 (678)342-4343

Current Batch: 08192020 Wed 8/19/2020 12:50:44 PM Check 15-1 Table T-3 kimberly Station BACKUP

VISA XXXXXXXXXXXXX5239 Approval 070125

\$29.92 BASE TIP

TOTAL

Customer Copy

-Thank You-Want more coupons & offers? Sign up for our newsletter and get small FREE KNOTS! http://bit.ly/jpcovington

To Discuss Water System Stretegic Plan

NCWSA

NT 1 Nome 1 Dom

10176 Carlin Drive Covington, GA 30014 (678)342-4343

Check 15-1 kimberly Guests 4	Table T-3 8/19/2020 12:38 PM
Basket Chips !! as app !!	2.99
#3 Zone w/ 1 Reg Top Cheese Calzone Pepperoni	8.99
Fountain Diet Coke #2 Slice w/ 1 Reg Top S Slice Pepperoni	6.99
Lunch Spec Salad Garden Salad Sm Honey Mustard Fountain Diet Coke	
#4 Any Sub, Chip/Fry Special Sub *SUB Tortilla Wrap* CHIPS Fountain Diet Coke	8.99
Subtotal Tax	27.96 1.96
TOTAL	29.92
18% (5.03) 20% (5.59) 25% (6.99) BALANCE DUE	29.92

Thank You!

Want more coupons & offers? Sign up for our newsletter and get small FREE KNOTS with your next purchase! http://bit.ly/jpcovington

# Newton County Purchase Card Activity Log

*C	OUNT	**
80	A	SE
3	Ei os	A G
WI		4
	VEWTON *	* NOT WATER

Cardholder Name KATHY KI	TCHENS	
Department SUPERIOR	R COURT	
Last 4 Digits of Card 8229		
Month Sep-20	Sep 2020	

\*Must be completed if charge is for a meal.

					a IIIcai.
Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
8/24/2020	ZOOM.US	Used for Drug Court Staffing and Drug Court	\$14.99	25011100 523700	Copy sent to Cathy Davis and Beth O' Donnell
				10011000523600 CRF2	

Statement Total:

\$14.99

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Kathy Kitcheno
Cardholder Signature

Approval Signature (Department Head, Elected Official, or County Manager)

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

# SERVICES

**CARD SERVICES** P.O. BOX 2181 COLUMBUS GA 31902-2181

Account NumberXXXX-XXXX-XXXX-8229 Payment Due N/A New Balance N/A Minimum Payment N/A

KATHY KITCHENS **NEWTON COUNTY BOC STE 204** 1113 USHER ST NW **COVINGTON GA 30014-2471** 

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762000168229

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Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

V	'isa	Account	Summary	
---	------	---------	---------	--

Account Number Statement Closing Date Credit Line Available Credit Minimum Payment Payment Due Date

XXXX-XXXX-XXXX-8229 September 15, 2020 \$500.00 N/A

N/A N/A

#### Balance Summary

Previous Balance N/A Credits \$0.00 Purchases and Debits \$14.99 Cash Advances \$0.00 **FINANCE CHARGE** N/A New Balance N/A

(See reverse side for billing and other important information)

#### Important Contact Information

Payment Address:

Pay Online:

TTY Telephone:

Card Services P.O. Box 2181

Columbus, GA 31902-2181 www.commercialcardview.com

1-877-254-3568

Customer Inquiries Address:

Commercial Customer Support

P.O. Box 23061

Columbus, GA 31902-3061

Customer Service:

1-888-SYNOVUS (796-6887)

#### Transaction Detail

Trans Post **Purchase** Date Date Description Order No. <u>Amount</u> 08/25 ZOOM.US 888-799-9666 WWW.ZOOM.US CA 08/24 89078264 \$14.99





Zoom Video Communications Inc. 55 Almaden Blvd, 6th Floor San Jose, CA 95113 billing@zoom.us

Invoice Date: Invoice #: Payment Terms:

08/24/2020 INV37750204 Due Upon Receipt 08/24/2020

Due Date: Account Number

53052140

Currency:

USD

Account Information:

Newton County Adult Felony Drug Court 1132 Usher Street, Room 210 Covington, Georgia 30014 United States

kwynne@co.newton.ga.us

Remittance Details should be sent to: Finance@zoom.us

Purchase Order Number:

Tax Exempt Certificate ID:

#### Zoom W-9

	CHARGE DETAILS			
Charge Description	Service Period	Subtotal	Tax	TOTAL
Charge Name: Standard Pro Monthly Quantity: 1 Unit Price: \$14.99	08/24/2020-09/23/2020	\$14.99	\$0.00	\$14.99

		INVOICE TOTALS		
:			Subtotal:	\$14.99
		1	Total (Including Tax):	\$14.99
	 	 	Invoice Balance:	\$0.00

	TAX DETAILS	7.4		
 Charge Name	Tax Name	Jurisdiction	Charge Amount	Tax Amount
			Total Tax	\$0.00

TRANSACTIONS	
Invoice Total	\$14.99





* * * * * * * * * * * * * * * * * * * *	Transaction Number	Transaction Type	Description	Applied Amount
08/24/2020	P-40210881	Payment		(\$14.99)
			Invoice Balance	\$0.00

Zoom Phone services provided by Zoom Voice Communications, Inc. Rates, terms and conditions for Zoom Phone services are set by Zoom Voice Communications, Inc.

# Newton County Purchase Card Activity Log



Cardholder <u>Name</u>	Kendra Mayfield
Department	Juvenile Court
Last 4 Digits of Card	*9885
Month	20-Sep

\*Must be completed if charge is for a meal.

Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
08.29.20	Zoom	Conduct virtual judicial proceedings for Juvenile Court	\$14.99	100 26000 531100	10011000 523600 CRF2
				and the particle of the same	
			,		
		0.1	04400	V 10/4	

Statement Total:

\$14.99

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Cardholder Signature

Approval Signature (Department Head, Elected Official, or County Manager)

# SYNOVUS

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

CARD SERVICES P.O. BOX 2181 COLUMBUS GA 31902-2181

SERVICES CARD

Z Z Z Account NumberXXXX-XXXX-XXXX-9885 Payment Due New Balance

Minimum Payment

KENDRA MAYFIELD JUVENILE COURT 1113 USHER STREET SW SUITE 204 COVINGTON GA 30014

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Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

Visa Account Summary	Summary	Balance Summary	mary
Account Number Statement Closing Date Credit Line Available Credit Minimum Payment Payment Due Date	XXXX-XXXX-9885 ate September 15, 2020 \$4,500.00 N/A N/A N/A	Previous Balance Credits Purchases and Debits Cash Advances FINANCE CHARGE New Balance	N/A \$0.00 ebits \$14.99 \$0.00 \$0.00 \$0.00 \$0.00
Important Co	Important Contact Information	(See reverse side for billing an	(See reverse side for billing and other important information)
Payment Address:	Card Services P.O. Box 2181	Customer Inquiries Address:	Commercial Customer Support P.O. Box 23061
Pay Online: TTY Telephone:	Columbus, GA 31902-2181 www.commercialcardview.com 1-877-254-3568	Customer Service:	1-888-SYNOVUS (796-6887)
Transaction Detail	Detail		
Trans Post Date Date Description	ption	Purchase Order No.	Amount
08/29 08/31 ZOON	08/29 08/31 ZOOM.US 888-799-9666 CA	P-41207260	\$14.99

# SYNOVUS

State CA 
 Posting Date
 Transaction Dat Merchant Name City

 08/31/2020
 08/29/2020
 ZOOM US
 888-799-9666

Billable NO

Zoom Video Communications Inc. 55 Almaden Blvd, 6<sup>th</sup> Floor San Jose, CA 95113 billing@zoom.us

08/29/2020 INV38731331 Due Upon Receipt 08/29/2020 56634980 USD Invoice Date:
Invoice #:
Payment Terms:
Due Date:
Account Number
Currency:
Account Information:

Juvenile Court 1132 USHER ST NW ST, COVINGTON, Georgia 30014 United States

kmayfield@co.newton.ga.us

Remittance Details should be sent to: Finance@zoom.us

Tax Exempt Certificate ID:

Purchase Order Number:

Zoom W-9

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Charge Name: Standard Pro Monthly Quantity: 1 Unit Price: \$14.99

08/29/2020-09/28/2020

\$14.99

\$14.99 \$0.00

# - INVOICE TOTALS

\$14.99 Subtotal: \$14.99 Total (Including Tax): \$0.00 Invoice Balance:

\$0.00 Tax Amount Charge Amount Total Tax Jurisdiction SIMIEN - A WOLDERAILS Tax Name Charge Name

# FANSACTIONS

Invoice Total

\$14.99

Applied Amount	(\$14.99)	\$0.00
n Description Applied Amount		Invoice Balance
Transaction Type	Payment	
Transaction Date Transaction Number Transaction Type	P-41207260	
Transaction Date	08/29/2020	

Zoom Phone services provided by Zoom Voice Communications, Inc. Rates, terms and conditions for Zoom Phone services are set by Zoom Voice Communications, Inc.

## Newton County Purchase Card Activity Log

Cardholder	
Name MARCELLO BANES	
Department Board of Commissioners	
Last 4 Digits of 0925	



\*Must be completed if charge is for a meal.

				mast 20 completed it offargo to for a mean	
Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees/Detailed Description
Transaction Date	Merchant Name				
8/17/2020	IHOP #3442	Chairman Banes Meeting with Constituents	32.33	100-11100-531300	Chairman + Serra Hall
8/18/2020	OLIVE GARDEN 00015941	Chairman Banes Meeting with Constituents	27.65	100-11100-531300	Chairman Banes + Mayor Jason Lary
8/19/2020	QT 798	Chairman Banes' County Vehicle Fuel	43.22	100-11100-531270	
8/20/2020	ADOBE CREATIVE CLOUD	MONTHLY SYSTEM SUBSCRIPTION	52.99	100-11100-523600	
8/25/2020	OLIVE GARDEN 00015941	Chairman Banes Meeting with Constituents	43.62	100-11100-531300	Chairman Banes + Chairman Michael Thurmon
8/27/2020	SQ THE TOWN HOUSE CAFE	Chairman Banes Meeting with Constituents	22.00	100-11100-531300	Chairman Banes + Robert Foxworth
9/3/2020	LOS CHARROS	Chairman Banes Meeting with Constituents	32.57	100-11100-531300	Chairman Banes + Chairman Oz Nesbitt and Mayor Evans
9/8/2020	MCW#267-COVINGTON	Monthly Car Maintenance	29.99	100-11100-531271	
9/10/2020	SKRIMP SHACK COVINGTON	Chairman Banes Meeting with Constituents	37.13	100-11100-531300	Chairman Banes + Lanier Sims
9/12/2020	QT 802	Chairman Banes' County Vehicle Fuel	38.84	100-11100-531270	
9/11/2020	BULLRITOS 14	Chairman Banes Meeting with Constituents	23.18	100-11100-531300	Chairman + Serra Hall
		4			
				1-	

Statement Total:

383.5

Cardholder Signature

Month 9/1/2020

Approval Signature (Department Head, Elected Official, or County Manager)

## Synovus<sup>®</sup>

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

> CARD SERVICES P.O. BOX 2181 COLUMBUS GA 31902-2181

CARD SERVICES

Account NumberXXXX-XXXX-XXXX-0925

Payment Due New Balance

N/A

Minimum Payment

N/A

MARCELLO BANES NEWTON COUNTY BOC STE 204 1113 USHER ST NW COVINGTON GA 30014-2471

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762000690925

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Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

#### Visa Account Summary

Account Number XXXX-XXXX-0925
Statement Closing Date September 15, 2020
Credit Line \$20,000.00
Available Credit N/A
Minimum Payment N/A
Payment Due Date N/A

#### **Balance Summary**

 Previous Balance
 N/A

 Credits
 \$0.00

 Purchases and Debits
 \$383.52

 Cash Advances
 \$0.00

 FINANCE CHARGE
 N/A

 New Balance
 N/A

#### Important Contact Information

(See reverse side for billing and other important information)

Payment Address:

Card Services P.O. Box 2181

1-877-254-3568

Customer Inquiries Address:

Commercial Customer Support

P.O. Box 23061 Columbus, GA 31902-3061

Pay Online: TTY Telephone: Columbus, GA 31902-2181 www.commercialcardview.com

Customer Service:

1-888-SYNOVUS (796-6887)

#### Transaction Detail

Trans		Decembring	Purchase	
Date	Date	Description	Order No.	Amount
08/17	08/19	IHOP #3442 COVINGTON GA	017496	\$32.33
08/18	08/20	OLIVE GARDEN 00015941 LITHONIA GA		\$27.65
08/19	08/21	QT 798 COVINGTON GA	0079801F2HAXE5	\$43.22
08/20	08/21	ADOBE CREATIVE CLOUD 408-536-6000 CA	BL1245699763	\$52.99
08/25	08/27	OLIVE GARDEN 00015941 LITHONIA GA		\$43.62
08/27	08/28	SQ *THE TOWN HOUSE CAFE COVINGTON GA	00023058430131609	\$22.00
09/03	09/04	LOS CHARROS CONYERS GA		\$32.57
09/08	09/09	MCW#267-COVINGTON COVINGTON GA		\$29.99
09/10	09/11	SKRIMP SHACK COVINGTON COVINGTON GA		\$37.13
09/11	09/14	BULLRITOS 14 COVINGTON GA		\$23.18



#### IHOP Store #3442 10340 Industrial Blvd. Covington, GA 30014 Phone: (770) 787-0010 TABLE# 53.1 SERVER 269/Kennede CHECK# 2225 TYPE PRE AUTH ACCOUNT TYPE Visa CARD NUMBER \*\*\*\*\*\*\*\*\*\*0925 08/17/2020 10:14 DATE/TIME REC 011744 INV/CHK 2225 MU0297706496 REFERENCE. SEQUENCE 656 017496 AUTH. ENTRY METHOD CHIP TOTAL \$27.33 5,00 TIP: TOTAL: APPROVED - THANK YOU BANES/MARCE TO 187 120 APP 1 ... AID $\mu^{*}$ .... Taluate. IVR ite hath TSI 111/5(11 1.1 11 THE SITTER الاز ربعد المناه المالية your records. CUSTOMER COPY \*\*\*\*\*\*\*\*\*\*\* We Want Your Feedback! \*\*ON YOUR NEXT VISIT\*\* Receive one (1) Free Short Stack of Buttermilk Pancakes when you complete our survey. Follow these easy steps: 1) Call 1-800-852-9076 or visit www.talktoihop.com within 3 days 2) Enter the following code: 3442081722258 3) Complete the brief survey 4) Fill in the coupon code you receive here: 5) Bring this receipt to IHOP and Enjoy!

Limit one coupon per check. Expires 30 days after visit.

OLIVE GARDEN 1599 3011 Furner III Lithonia, GA 2007.

Clerk 274, 10 Akalnesh T 13:26:03 08/18/20/0

1 Iced Tea
1 No Beverage
1 L Eggplant Paracita
1 \* Salad

24.97

1.08

11.64

1 L Chicken Parmigr 1 \* Salad

SUBTOTAL TAX TOTAL

Payments: VISA CREDIT/1925 Auth/Chip Read

TID:\*\*\*2386 RRN:2008i812000/1/3 AID:A000000000310 TVR:8000008000

IAD:FF811954D913096C30.44C TSI:6800

ARC:00 TRN SEQ:0000-128 TRN ID:11407 27d NET:Visa MODE:Issuer

Auth Code: 070094

Purchase Amount Tip Faid

TOTAL PAID

Check Balance

THANKS FIR IS No.

Marcus Sims

GENERAL MANAGER (770) 482-4 00

#### OLIVE GARDEN 1594 3011 Turner Hill Rd Lithonia, GA 30038

#### \*\*\*\*Dine In\*\*\*\*

Table 355	:821693
Nmahaminata Y 02:15:31 08/25/2020	Gst 2
AP Plates 1 No Beverage	3.79
1 Chicken & Shrimp Carbonara 1 * Salad	18.99
Guest No.2 CC	
	2.99
1 L Chicken Parmigiana 1 * Salad	9.99
Duplicate Receip Stored Order	ot
Subtotal	35.76

Sales Tax 2.86

Total 43.62

(0925)Visa

43.62

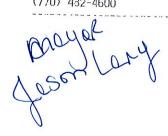
Amount Due 0.00 Change 0.00

#### Dine In

GRACIAS POR VISITARNOS HOY!

Marcus Sims

GENERAL MANAGER (770) 432-4600





#### Bullritos #14 10327 Industrial Blvd Covington, GA 30014

Check 40 Crystal . Guests 1		Tab MARCELLO 9/11/2020 2:12 PM
Salad Chicken		7.69
Add Guac CHICKEN QUES 24 OZ FOUNTA		2.49 8.99 2.49
Subtotal Sales Tax		21.66 1.52
TOTAL	CAS CASS DAMA	23.18
VISA Acct. XXXXXXXX Approval 067473	XXXX0925	-23.18
CHANGE DUE		0.00
	Thank you!	<u> </u>

Serra Hall



#### The Town House Cafe

1145 Washington St Covington, GA 30014 (770) 787-2788

8:59 AM

thetownhousecafe.net

Aug 27, 2020

Ticket: T3

Authorization 061649

Receipt jVUv 

VISA CREDIT

AID AO 00 00 00 03 10 10

FOR HERE	
Drink	\$2.50
Regular Breakiust cheese (\$0.50)	57.50
Bacon & egg sandwich cheese (\$0.50)	\$5.00
Grits cheese (\$0.50)	\$2.00
Total	\$17.00
Visa 0925 (Chip)	\$17.00
Tip 5	5.00
Total \$22	.00
× /	
Marcello Banes	
l agree to pay the above total en	ount

**CUSTOMER COPY** 

agreement.

Robert



The Town House Cafe 1145 Washington St Sep 21, 2020 Covington GA 30014 8:52 AM (770) 787-2788 thetownhousecafe.net Ticket: T6 Authorization 083088 Receipt j3VI VISA CREDIT AID A0 00 00 00 03 10 10 FOR HERE Egg sandwich \$2.50 Coffee \$2.00 \$2.00 Orange juice \$3.50 Sausage sandwich **Custom Amount** \$1.50 \$2.50 Drink Regular Breakfast \$7.50 cheese (\$0.50) **Custom Amount** \$1.00 \$22.50 Total Visa 0925 (Chip) \$22.50 Tip Total

I ag ee to pay the above total amount according to my card issuer agreement.

Marcello Banes

**CUSTOMER COPY** 

Los Charros 1965 Hwy 138 N Conyers, GA 30013 770-785-7554

Tbl: 27 Gsts: 1 Srvr: Summer

Date: 09-03-2020 3:27pm 1.1558.00062

The second secon		
1 8 oz Queso Dip	4.99	
1 Quesadilla	4.99	
Steak		
1 3-Tacos:Taco de	9.99	
No Beans		
Flour Tortilla		
Carne Azada		
1 Sm Taco Salad	4.99	
No Onion		
No Tomato		
No Sour Cream		
No Guacamole		
Ground Beef		
Guest # 1 Total:	27.57	

Sub-Total: 24.96 Tax: 1.75 Card Fee: 0.86

Card Fee: Cotal Due:

Total Due: 27.57

Pymt Visa 27.57

\*\*\*\*\*\*\*\*\*0925 \*\* / \*\* Auth: AUTO

Track1 62-81494

SALE

Card Number: \*\*\*\*\*\*\*\*\*\*\*\*\*0925

Apprvl Code: AUTO

AMOUNT:

27.57

TIP:

5.00

TOTAL:

32.57

Cardmember agrees to pay total in accordance with agreement governing use of such card.

15%=\$3.74 17.5%=\$4.36 20%=\$4.99 For Your Convenience: Give us your truthful feedback so that Text Agua65 to 678-509-6696

Chair DZ Nosbit mayor Evans

#### Los Charros 1965 Hwy 138 N Conyers, GA 30013 770-785-7554

Tbl: 27 Gsts: 1 Srvr: Sun Date: 09-03-2020 3:26pm	
1 8 oz Queso Dip	4.99
1 Quesadilla Steak	4.99
1 3-Tacos:Taco de No Beans Flour Tortilla Carne Azada	9.99
1 Sm Taco Salad No Onion No Tomato No Sour Cream No Guacamole Ground Beef	4.99
Sub-Total:	24.96
Tax:	1.75
Card Fee:	0.86
Total Due:	27.57

15%=\$3.74 17.5%=\$4.36 20%=\$4.99 For Your Convenience: Give us your truthful feedback so that Text Agua65 to 678-509-6696

## The Skrimp Shack

## (25) Covington

5334 Highway 20 S Covington, GA 30016 (770) 728-0132

## \*\*\* TAKEOUT \*\*\*

Ticket #80308162

User: Caitlin

9/10/2020 1:00:10 PM

Order: Bands

Item	Qty	Price	Total
Whiting DINNER- ***Add 8 SKRIN	1 /P	10. 45	10. 45 6. 00
SLAW, Side REGULAR DRINK SKRIMP DINNER			
(20) FF REGULAR DRINK	1	18. 25	18. 25

Subtotal	34. 70
Tax	2.43
Total	37. 13

Tender: VISA

37. 13

\*\*\*\*0925

Sale APPROVAL Auth: 029515

Entry Method:ICC AID: A0000000031010

Batch: 74

AC:F542C9D8EB5D19AC

CVM:Signature

THANK YOU!

ANY COMMENTS, QUESTIONS OR CONCERNS, PLEASE CONTACT US Al:

COVINGTON@THESKRIMPSHACK.COM OR VISIT US @ https://theskrimpshack.com/ Welcome to Chick-fil-A Covington FSR (# 04285) Covington, GA Operator: Chris Giella

> CUSTOMER COPY 0/15/2020 9:13:16 F DRIVE THRU

Order Number: \1312556

11 CFA Sand 40.59
11 Fries MD 20.79
1 MktSld GRL 7.89
- Crmb BlChse 2 + Appl Vin

1 Dt Lmnde MD 1.99
1 Lmnde MD 1.99

Sub. Total: \$73.25 Tax: \$5.13 Total: \$78.38

Change \$0.00 Visa: \$78.38 Register:2 Tra Seq No: 1312556

Cashier:Madelynn

It was a pleasure strving you!
Have a wonderful day.
Forgot to Scal?
one.chick-fil-a.com/forgot2scan

Sep 15 2020 9:10 pm

Card Number : \*

Card Type : VIAA Approval : 072549

AID : A00000000310 to

BOLITICA Expersión

#### Welcome to QuikTrip

#### QuikTrip #00802 2400 SALEM RD. SE CONYERS, GA 7707614384

8:06:05 PM

09-12-2020

Register #0002

Gas Sale:

\$38.84

Grade: UNLEADED

Pump: 17

Gallons: 20.563

PPU: 1.889/Gal

Sub-Total:

\$38.84

Tax:

\$.00

Total:

\$38.84

Payment Methods

Visa Sale

\$38.84

Signature not required

\*\*\*\*\*\*\*\*\*\*0925

Auth Code: 039188

Entry Mode: Swiped

We Thank You Please Come Again

52: JROAD ST ORTERDALE GA 30014

09/19/2020 72 569126

09:00:21 AM

" HA REPLYINT " PEO 'INT \*\*\* REPRINT \*\*\*

PUMP# 7

REGULAR LR -20 "G

PRICE/GA:

19

FUEL TUTY

\*\*\* . ... ... A AINI

EPILINT \*\*\*

CREDIT

\$ 41

**V10a** 

\*\*\*\*\*\*\*\*\*\*0925

Entry Method: Swiped

Auth #: 028836

Veh #:

Resp Code: 000

Stan: 084371557

Invoice #: 978/93

BP SITE ID: 1793850

Pave up to 16 cents

off per gallon. ind out hyw at

up.com/logalheroes

REWARD

\*\*\*\*\*\*0925 \*\*\*\*\*

stan: 08437155595

#### INVOICE



**Line No** 

Adobe Inc. 345 Park Ave San Jose, CA 95110

Material No / Description

Bill To: Marcello Banes 1124 Clark St SW GA 30014-2364

Reprint

Page 1 of 1

Invoice Number: 1262723972

**Invoice Date:** 

SEP-19-20 Payment Terms: Credit Card

**Due Date:** 

SEP-26-20

Purchase Order: ADD017483954

**Contract No** 

00004490

Order Number:

5017402548

**Order Date: Customer No.:**  OCT-19-17 1452233

Bill to No.

**Unit Price** 

237901332

**Extended Price** 

**Adobe Contact Information:** 

Qty

https://helpx.adobe.com/contact.html

000010	65182902 EA  Creative Cloud Indiv ALL MLP DSP Ret Inv 01 mnth MUN 1 YR DSP			52.99		52.99
	Greative Gloud Indiv ALL IVILP DSF	- Ret inv of minut work I TR DSP				
rth Ame	rica	Invoice Tota	ls			
IE WEST CO. P.L. SA		S & H 0.00	Sales Tax 0.00	Currency USD	Qty Shipped	Invoice Total 52.99

UOM

Comments:



Marcello Banes <mbanes@co.newton.ga.us>

#### Your receipt from Mister Car Wash? Thanks for being a member!

1 message

misteruwc@mistercarwash.com <misteruwc@mistercarwash.com> To: mbanes@co.newton.ga.us Tue, Sep 8, 2020 at 4:01 AM

GA-Covington 3261 Hwy 278 NE Covington, GA 30014 770-788-0033 9/8/2020 4:00 AM

#### 090849593

1 EXPRESS PLAT UNLIMITED SALE \$29.99
SUBTOTAL: \$29.99
TAXES: \$0.00
TOTAL: \$29.99
TENDERED: \$0.00
CHANGE DUE: \$0.00

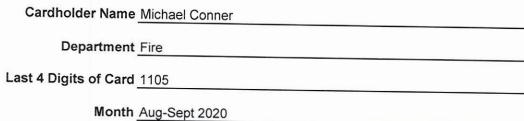
Share the Shine! Visit us at https://mistercarwash.com/survey/ to tell us how we're doing.

557

#### PAID

VISA Sale XXXX XXXX XXXX 0925 Thank you, Marcello Banes 0925

# Newton County Purchase Card Activity Log





\*Must be completed if charge is for

		The areas are respectively and the second of			a meal.
Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
8/24/2020	Georgia Department of Public Health	EMT license fee-Myers	\$77.75	100 35000 523600	meal Attendees
8/24/2020	Georgia EMS Association	BCLS cards for 75 employees	\$600.00	100 35000 523600	
8/27/2020	GAPS	Fingerprinting for EMT license-Myers	\$51.50	100 35000 523600	
8/28/2020	GAPS	CREDIT for fingerprinting that had already been done-Myers	-\$51.50	100 35000 523600	
9/4/2020	Simulaids	To fix simulation aid for EMT training	\$923.35	100 35000 522210	

Statement Total:

\$1,601.10

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Cardholder Signature

Approval Signature (Department Head, Elected Official, or County Manager)

## SYNOVUS<sup>®</sup>

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

> CARD SERVICES P.O. BOX 2181 COLUMBUS GA 31902-2181

CARD SERVICES

Account NumberXXXX-XXXX-XXXX-1105

Payment Due

N/A

New Balance

N/A

Minimum Payment

N/A

MICHAEL CONNER NEWTON COUNTY BOC 1113 USHER ST NW COVINGTON GA 30014-2469

\*\* 0000000

760038101105

000000000

000000000

Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

#### Visa Account Summary

Account Number XXXX-XXXX-1105
Statement Closing Date September 15, 2020
Credit Line \$5,000.00
Available Credit N/A
Minimum Payment N/A
Payment Due Date N/A

#### **Balance Summary**

 Previous Balance
 N/A

 Credits
 \$51.50

 Purchases and Debits
 \$1,652.60

 Cash Advances
 \$0.00

 FINANCE CHARGE
 N/A

 New Balance
 N/A

#### Important Contact Information

(See reverse side for billing and other important information)

Payment Address:

TTY Telephone:

Card Services P.O. Box 2181

1-877-254-3568

Customer Inquiries Address:

Commercial Customer Support

P.O. Box 23061

Pay Online: www.

Columbus, GA 31902-2181 www.commercialcardview.com

Customer Service:

Columbus, GA 31902-3061 1-888-SYNOVUS (796-6887)

#### Transaction Detail

9	Trans	Post		Purchase	
_	Date	Date	Description	Order No.	Amount
	08/24	08/25	GDPH EMS-FEE 678-459-8292 GA	00297019 00067	\$77.75
	08/24	08/25	GEORGIA EMS ASSOCIATION 678-2830815 GA	443853627	\$600.00 🗸
	08/27	08/28	L2G*GA BKGRD CHECK 888-4 888-439-2512 CA	3788012507	\$51.50
	08/28	08/31	L2G*GA BKGRD CHECK 888-4 888-439-2512 CA	3788046380	\$51.50CR
	09/04	09/07	SP * SIMULAIDS HTTPSSIMULAID NY ************************************	13127262175287	\$923.35





Georgia Office of EMS and Trauma 1680 Phoenix Blvd, Ste 200 Atlanta, GA 30349 770-996-3133

#### **Payment Receipt**

Michael Conner 1113 Usher St. COVINGTON Georgia, 30014

License	Name	License Cost	Payment
Initial EMT Lice	ense		
and the first transfer and applicable for the problem to the late of the late	Myers, Trey Ra'shaun	\$77.75	\$77.75
		Remaining Balance	e: \$0.00

Transaction #	Date	Payment Method	Amount Paid
00009515	Mon 8/24/20	Credit Card (1105)	\$77.75

Total Payment: **\$77.75**Remaining Balance: **\$0.00** 

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# GEORGIA EMERGENCY MEDICAL SERVICES ASSOCIATION

Home > Anonymous profile > Payment



Back

## **PAYMENT**

**DETAILS** 

Available balance \$0.00

Amount \$600.00

Date 08/24/2020

Tender Online payment (Wild Apricot Payment)

Received from Brad Redmond

bredmond@co.newton.ga.us

#### PAYMENT FOR

Invoice #07910 \$600.00

08/20/2020 American Heart Association BCLS Provider Cards 75 at GEMSA Member Price

of \$8 each

The mission of the Georgia Emergency Medical Services Association is to advocate for the emergency medical provider, develop educational programs, liaison activities, provider benefit programs, and improvements to the Emergency Medical Service System in Georgia.

Georgia EMS Association | 386 River Point Drive | McDonough, GA 30252 | Contact us



# Applicant Fingerprinting Online Services



## Applicant Registration Refund successful

Registration ID:

GA208QC48101036

**Confirmation Number:** 

3788046380

Transaction Fee:

\$51.50

Print

Close

1888.439.2512

Need Refund



#### Registration Receipt

Registration ID GA208QC48101036

Registration Date AUGUST 26, 2020

Requesting Agency *GA922993Z* 

Results will be sent to GA922993Z - GEORGIA OFFICE OF EMS/TRAUMA

Last Name MYERS

First Name TREY

Reason for Fingerprinting Emergency Medical Services Personnel

Payment Type Credit Card

Transaction Fee \$51.5

Credit Card Payment Confirmation Number 3788012507



Note: This barcode allows the fingerprint site to quickly retrieve your information. It is NOT a confirmation of payment.

This registration will expire after 90 days from the registration date. It will be cancelled and any payment will be refunded if the applicant has not been fingerprinted.

Next Step - Agency Approval

Your agency will approve your registration. Once approved, you will receive an email notifying when you can proceed to a fingerprint site. If your registration got rejected, you will receive an email with instructions on what to do next.



#### Scheree Howard <showard@co.newton.ga.us>

#### Re: Requesting refund [ ref:\_00D0Y2Fppt.\_5001v1SsFC8:ref ]

1 message

Gemalto Cogent <cgthelpdesk@gemalto.com>

Thu, Aug 27, 2020 at 10:15 AM

To: "showard@co.newton.ga.us" <showard@co.newton.ga.us> Cc: "garegistration@gemalto.com" <garegistration@gemalto.com>

You can cancel the registration here: https://pci.aps.gemalto.com/gaperlpub/cancelreg\_pci.pl?lang=en
The refund will show up within 5 days.

Refund requested & received but
wo receipt to print.

From: Scheree Howard [showard@co.newton.ga.us]

Sent: 8/27/2020 7:10 AM

To: garegistration@gemalto.com Subject: Re: Requesting refund

Please see the attached receipts that I forgot to attach on last email.

\*K. Scheree Howard \*[image: =""]
Executive Administrative Coordinator
Newton County Fire Service
678-625-5010

On Thu, Aug 27, 2020 at 10:05 AM Scheree Howard <showard@co.newton.ga.us> wrote:

```
> Hi,
I need to request a refund for fingerprinting fee for an employee who
> already had an approved registration. Below are details:
> name: Trey Myers
> approved registration id#: GA207A636275091
> date: 07/10/20
> *NEED REFUND ON THIS REGISTRATION:*
> name: Trey Myers
> registration id# GA2080QC48101036
> date: 8/26/20
> Please let me know what else I need to do to take care of this situation.
> You can reach me by phone also if needed. 678-625-5010.
> Thank you,
> Thank you,
```

\*K. Scheree Howard \*[image: =""]Executive Administrative Coordinator



#### Scheree Howard <showard@co.newton.ga.us>

#### Fwd: Order 1248 confirmed

1 message

Rebecca Hill <rhill@co.newton.ga.us>

Fri, Sep 4, 2020 at 1:35 PM

To: Scheree Howard <showard@co.newton.ga.us>, Ashley Holland <aholland@co.newton.ga.us>

FYI Rebecca C. Hill, AS, PN, Paramedic **Newton Fire Service EMS** Coordinator Level III EMS Instructor 4136-A Highway 278 Covington, GA 30014 Office-678-625-2051 Cell-678-371-0891 rhill@co.newton.ga.us

----- Forwarded message ------

From: Nasco Healthcare <info@nascohealthcare.com>

Date: Fri, Sep 4, 2020 at 1:34 PM Subject: Order 1248 confirmed To: <rhill@co.newton.ga.us>

## Nasco Healthcare

**ORDER 1248** 

## Thank you for your purchase! You will see "Simulaids" on your credit card statement as the billing name

View your order or Visit our store

### Order summary

 $9999 \times 1$ 

\$923.35

Subtotal \$923.35

Shipping \$0.00

**Taxes** \$0.00

Total

\$923.35 USD

## To fix Simulation aid for EMT training.

#### Customer information

Billing address michael conner 11545 COVINGTON BYPASS ROAD **COVINGTON GA 30014 United States** 

#### Payment method

VISA

Payment method — \$923.35

If you have any questions, reply to this email or contact us at info@nascohealthcare.com

## Newton County Purchase Card Activity Log

COU	NTY
(2)	0
2	
34	5
1 * 11	121 ×

Cardholder Name	Michael Conner
Department	Fire
Last 4 Digits of Card	1105
Month	Aug-Sept 2020

\*Must be completed if charge is for a meal.

					a meai,
Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
8/24/2020	Georgia Department of Public Health	EMT license fee-Myers	\$77.75	100 35000 523600	
8/24/2020	Georgia EMS Association	BCLS cards for 75 employees	\$600.00	100 35000 523600	
8/27/2020	GAPS	Fingerprinting for EMT license-Myers	\$51.50	100 35000 523600	
8/28/2020	GAPS	CREDIT for fingerprinting that had already been done-Myers	-\$51.50	100 35000 523600	
9/4/2020	Simulaids	To fix simulation aid for EMT training	\$923.35	100 35000 522210	
***************************************					

Statement Total:

\$1,601.10

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Cardholder Signature

Approval Signature (Department Head, Elected Official, or County Manager)

## Newton County Purchase Card Activity Log

(00	TINUC	
3		GE
THE STATE OF THE S		SH G
WIL	1821	

Cardholder Name	Newton County Financial Admin
Department	Finance
ast 4 Digits of Card	3345

Month September 2020

\*Must be completed if charge is for a meal.

Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
8/23/2020	Zoom	County Zoom Subscription	\$199.90	10011000 523600 CRF2	
8/21/2020	Government Training	GACE Fall Conference - Tiana Combs	\$510.00	10074100 523700	
8/21/2020	Government Training	GACE Fall Conference - Anthony Henderson	\$510.00	10074100 523700	
8/21/2020	Government Training	GACE Fall Conference - April Adams	\$510.00	10074100 523700	
8/24/2020	Government Training	GACE Fall Conference - Tracy Hernandez	\$510.00	10074100 523700	
8/31/2020	Zoom	Charged In Error - Requesting Refund	\$14.99	100 111910	
9/11/2020	UGA Cont Ed	CVOIG Intro Govt Accounting - Elizabeth Frazier	\$469.00	10015100 523700	

Statement Total:

\$2,723.89

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Cardholder Signature

Approval Signature (Department Head, Elected Official, or County Manager)

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

> **CARD SERVICES** P.O. BOX 2181 COLUMBUS GA 31902-2181

CARD

Account NumberXXXX-XXXX-XXXX-3345 Payment Due New Balance N/A Minimum Payment N/A

**NEWTON CO FINANCIAL ADMIN NEWTON COUNTY BOC STE 204** 1113 USHER ST NW **COVINGTON GA 30014-2471** 

\*\* 0000000

762000573345

000000000

000000000

Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

#### Visa Account Summary

Account Number XXXX-XXXX-XXXX-3345 Statement Closing Date September 15, 2020 \$5,000.00 Credit Line Available Credit N/A Minimum Payment N/A Payment Due Date N/A

#### Balance Summary

Previous Balance N/A Credits \$0.00 Purchases and Debits \$2,723.89 Cash Advances \$0.00 **FINANCE CHARGE** N/A New Balance N/A

#### Important Contact Information

(See reverse side for billing and other important information)

Payment Address:

Pay Online:

TTY Telephone:

Card Services P.O. Box 2181

Columbus, GA 31902-2181

www.commercialcardview.com 1-877-254-3568

Customer Inquiries Address:

Commercial Customer Support

P.O. Box 23061

Columbus, GA 31902-3061

**Customer Service:** 

1-888-SYNOVUS (796-6887)

#### Transaction Detail

Trans Date	Post Date	Description	Purchase Order No.	Amount
08/23	08/24	ZOOM.US 888-799-9666 WWW.ZOOM.US CA	78373380	\$199.90
08/21	08/24	GOVERNMENT TRAINING 706-542-9532 GA	AG0A4AE7ABAE	\$510.00
08/21	08/24	GOVERNMENT TRAINING 706-542-9532 GA	AR0A6B495D18	\$510.00
08/21	08/24	GOVERNMENT TRAINING 706-542-9532 GA	AK0A7FFA8DDE	\$510.00
08/24	08/26	GOVERNMENT TRAINING 706-542-9532 GA	AG0A4AEEC868	\$510.00
08/31	09/01	ZOOM.US 888-799-9666 WWW.ZOOM.US CA	48071939	\$14.99
09/11	09/14	UGA CONTINUING EDUCATION 706-542-0510 GA	1910622321	\$469.00





## **Purchase Card Sign Out**

Date Checked Out: August 21, 2020
Date Returned: August 21, 2020
Only use this card for county use. The purpose of using this card will be to purchase:
GACE Fall Conference Registrations (3)
Augusta, GA 09:29:2020 thru 10:02:2020
I agree to not spend more than \$250 on the purchase card unless I have prior approval by Finance to do so. I
agree to return the card back to Finance as soon as possible after I have made my purchase(s) and within the
same business day. I agree to return the card back to Finance by 5pm if I have not used the card. I agree to
turn in all detailed receipts when I turn the card.
Finance Approval if Over \$250: Estimated Amount: \$1,530° (\$510° 200c)
Account Coding: 100 · 74100 - 523700
Signature of Card User: Crysta Docoley Date: 08:21-2020
Signature of AP Approver: Date: *If Needed

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

CARD

CARD SERVICES P.O. BOX 2181 COLUMBUS GA 31902-2181 Account Number XXXX-XXXX-XXXX-3345 Payment Due N/A New Balance N/A Minimum Payment N/A

**NEWTON CO FINANCIAL ADMIN NEWTON COUNTY BOC STE 204** 1113 USHER ST NW **COVINGTON GA 30014-2471** 

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762000573345

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Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

#### Visa Account Summary

XXXX-XXXX-XXXX-3345 Account Number Statement Closing Date September 15, 2020 Credit Line \$5,000.00 Available Credit N/A Minimum Payment N/A Payment Due Date N/A

#### Balance Summary

Previous Balance N/A Credits \$0.00 Purchases and Debits \$2,723.89 Cash Advances \$0.00 **FINANCE CHARGE** N/A New Balance N/A

#### Important Contact Information

(See reverse side for billing and other important information)

Payment Address:

Card Services P.O. Box 2181

Columbus, GA 31902-2181

Pay Online: www.commercialcardview.com TTY Telephone: 1-877-254-3568

Customer Inquiries Address:

Commercial Customer Support

P.O. Box 23061

Columbus, GA 31902-3061

**Customer Service:** 1-888-SYNOVUS (796-6887)

#### Transaction Detail

Trans Date	Post Date	Description	Purchase Order No.	Amount
08/23	08/24	ZOOM.US 888-799-9666 WWW.ZOOM.US CA	78373380	\$199.90
08/21	08/24	GOVERNMENT TRAINING 706-542-9532 GA	AG0A4AE7ABAE	\$510.00
08/21	08/24	GOVERNMENT TRAINING 706-542-9532 GA	AR0A6B495D18	\$510.00
08/21	08/24	GOVERNMENT TRAINING 706-542-9532 GA	AK0A7FFA8DDE	\$510.00
08/24	08/26	GOVERNMENT TRAINING 706-542-9532 GA	AG0A4AEEC868	\$510.00
08/31	09/01	ZOOM.US 888-799-9666 WWW.ZOOM.US CA	48071939	\$14.99
09/11	09/14	UGA CONTINUING EDUCATION 706-542-0510 GA	1910622321	\$469.00







Welcome, Tiana Combs

#### CHECKOUT COMPLETE. THANK YOU!

#### Please print this confirmation page for your records.

Registrant:
TIANA COMBS
CODE ENFORCEMENT OFFICER
NEWTON COUNTY BOARD OF COMMISSIONERS
1113 USHER ST
COVINGTON GA 30014
(678) 212-5413

Payment: \$510.00 PFLink Online Invoice #125473 NEWTON COUNTY BOC 1113 USHER ST 1113 USHER ST COVINGTON GA 30014

#### **GACE Conference**

Course: COD 190-00
Term: F2021
Section 1

Number: 12095 Number: 12095 Instructor(s): Staff

Location: Augusta Marriott, at the Convention Center, 2 Tenth Street, Augusta, GA 30901

Sep. 29, 2020 (Tue., 4:30 - 7 p.m.); Sep. 30, 2020 (Wed., 7 a.m. - 5 p.m.); Oct. 1, 2020 (Thu., 7 a.m. - 5 p.m.); Oct. 2, 2020 (Fri., 7

a.m. - 12:30 p.m.)

Units: 0.0 CEUs

Dates:

Contact Hours: 0.0 Contact Hours

#### **GACE Conference**

\*\*\*\*\*EARLY ONSITE REGISTRATION\*\*\*\* Due to COVID-19 and social distancing requirements, registration times will be staggered and your name badge, enrollment confirmation and packet of information will be on tables designated by the first letter of your last name - please adhere to the times to avoid large crowds. Tuesday, September 29: 4:30 p.m. - 7:00 p.m. (onsite registration will be staggered by last name); A-D: 4:30pm-5:00pm; E-I: 5:00pm-5:30pm; J-M: 5:30pm-6:00pm; N-R: 6:00pm-6:30pm; S-Z: 6:30pm-7:00pm. First Time Attendees: 4:30 p.m.-5:00 p.m. If you choose to wait until Wednesday morning to check-in, registration times will be as follows: A-F: 7:00am-7:30am; G-L:7:30am-8:00am; M-Z: 8:00-8:30am. \*\*\*First Time Attendees/New Members Meeting\*\*\*\* This meeting is MANDATORY. A meeting for first time attendees and new members to GACE will be held on Tuesday, September 29, at 6:00 p.m. The location will be provided during onsite registration. First time attendees should make arrangements to arrive by 4:30p.m. for onsite registration to attend the mandatory meeting at 6:00p.m. \*\*\*PARTICIPANT MATERIALS FOR CLASSES\*\*\*\*
Handout materials will not be printed and handed out for the classes for this conference. The course materials will be posted to the following website on for you to access and download. www.cviog.uga.edu/gace If you want a hard copy of the material, you are responsible for printing a copy prior to the conference. PLEASE BRING MATERIALS WITH YOU TO CLASS AS WE WILL NOT HAVE THE ABILITY TO PRINT ONSITE. IF YOU WAIT TO PRINT ONSITE, YOU WILL BE RESPONSIBLE FOR PAYING THE COST OF PRINTING IN THE BUSINESS CENTER AT THE HOTEL. In addition, the Augusta Marnott does not offer complimentary Wi-Fi access in the classrooms. Please download and print your materials prior to the class. If you choose to download the material to your electronic device please do so before arriving at the conference. Course materials should be printed prior to arriving on site. There is a business center on site at the Augusta Marriott with the ability to print for a fee. If your course materials are not posted at the time you register, please continue to check back with the website. I have asked all instructors to have the materials to me so that they can be loaded by August 14. \*\*\*\*\*\*REMEMBER TO CHECK YOUR ENROLLMENT CONFIRMATION FOR YOUR CLASS SCHEDULE - MAKE SURE YOU ARE ENROLLED IN THE CORRECT CLASSES SO YOU CAN DOWNLOAD THE CORRECT MATERIALS NEEDED\*\*\*\* WE WILL NOT BE ABLE TO PRINT HANDOUTS ONSITE. IT IS YOUR RESPONSIBILITY TO MAKE SURE YOU CHECK YOUR COMPLETION CHECK AND CHOOSE THE CORRECT CLASSES.\*\*\*\*\* IF YOU NEED TO CHECK YOUR PROGRESS IN THE CERTIFICATE PROGRAM - ACCESS YOUR RECORDS ONLINE BY VISITING THIS WEB SITE: www.cviog.uga.edu/gace - scroll to the bottom of the page and click on "find out more information about how to access your training records." You will not be able to make changes to your class choices onsite. Please review your completion check to make sure that you are taking the appropriate class. Due to space limitations, the classes may fill up quickly, so it is best to review your completion check prior to completing registration information. We cannot guarantee your ability to register for a certain class. \*\*\*\* You can only receive credit for the same class one time, if you duplicate the class, you will not receive credit again.\*\*\*\*\*\* \*\*\*\*Cancellation and Refund Policy\*\*\*\* Written notice of cancellation must be postmarked/dated no later than September 4, 2020, to receive a full refund of registration fees. Written requests postmarked/dated between September 5, 2020 and September 11, 2020 will be assessed a 25% administrative fee, and requests postmarked/dated after September 11, 2020 are not eligible for a refund. Registrants who fail to attend, cancel, or send a substitute will be liable for the full registration fee. Substitution of participant is encouraged over cancellation. To cancel registration or send a substitute, please send notification to Marci Campbell at mfp@uga.edu. \*\*\*\*BOARD OF REGENTS ATTENDANCE POLICY\*\*\*\* The Carl Vinson Institute of Government, a unit of the University of Georgia, and governed by the Board of Regents, provides continuing professional educational hours in several subject areas and certificate and/or certification programs. The Institute of Government is required by the Board of Regents to maintain an attendance policy during the training sessions. Attendance during your class sessions will be monitored and you are expected to be in your session at all times with the exception of scheduled breaks and meals. Credit will only be awarded to participants who adhere to the attendance policy and

Notes:

Enrollment Fees
Registration - 2.5 days (Full Conference)
Total for This Item:

complete any other course requirements. ur last name - please adhere to the times to avoid large crowds.

Total Payment: \$510.00

Reference #R619959

Price \$510.00

\$510.00





Welcome, Anthony Henderson

#### CHECKOUT COMPLETE. THANK YOU!

#### Please print this confirmation page for your records.

Registrant:
ANTHONY HENDERSON
CODE ENFORCEMENT OFFICER
NEWTON COUNTY BOARD OF COMMISSIONERS
1113 USHER STREET
COVINGTON GA 30014
(678) 685-1657

Payment: \$510.00 PFLink Online Invoice #125492 NEWTON COUNTY BOC 1113 USHER ST COVINGTON GA 30014

#### **GACE Conference**

Course: COD 190-00

1

Term: F2021

Section

Number:

Schedule

Number: 12095

Instructor(s): Staff

Location: Augusta Marriott, at the Convention Center, 2 Tenth Street, Augusta, GA 30901

Dates: Sep. 29, 2020 (Tue., 4:30 - 7 p.m.); Sep. 30, 2020 (Wed., 7 a.m. - 5 p.m.); Oct. 1, 2020 (Thu., 7 a.m. - 5 p.m.); Oct. 2, 2020 (Fri., 7

a.m. - 12:30 p.m.)

Units: 0.0 CEUs

Contact Hours:

0.0 Contact Hours

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#### Breakout Session(s) Selected:

12103 : Cultural Differences in Code Enforcement (Module Two) (Concurrent Session) 9/30/2020 9:00 AM to 5:00 PM

12104 : Safety Tactics and In-Field Safety (Module Two) (Concurrent Session) 10/1/2020 8:30 AM to 4:30 PM

12105 : Dealing with Difficult Situations (Module Two) (Concurrent Session) 10/2/2020 9:00 AM to 12:30 PM

Enrollment Fees
Registration - 2.5 days (Full Conference)

Total for This Item:

Total Payment: \$510.00

Price

\$510.00

\$510.00

complete any other course requirements. ur last name - please adhere to the times to avoid large crowds.

Reference #R620015

Notes:





Welcome, April Adams

#### CHECKOUT COMPLETE. THANK YOU!

#### Please print this confirmation page for your records.

Registrant:
APRIL ADAMS
CODE ENFORCEMENT OFFICER
NEWTON COUNTY BOARD OF COMMISSIONERS
1113 USHER STREET
COVINGTON GA 30016
(678) 625-1683

Payment: \$510.00 PFLink Online Invoice #125496 NEWTON COUNTY BOC 1113 USHER STREET 1113 USHER STREET COVINGTON GA 30014

#### **GACE Conference**

Course: COD 190-00

Term: F2021 Section

Number:

Schedule Number: 12095 Instructor(s): Staff

Location: Augusta Marriott, at the Convention Center, 2 Tenth Street, Augusta, GA 30901

Sep. 29, 2020 (Tue., 4:30 - 7 p.m.); Sep. 30, 2020 (Wed., 7 a.m. - 5 p.m.); Oct. 1, 2020 (Thu., 7 a.m. - 5 p.m.); Oct. 2, 2020 (Fri., 7

a.m. - 12:30 p.m.)

Units: 0.0 CEUs

Contact Hours: 0.0 Contact Hours

#### **GACE Conference**

Notes:

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## complete any other course requirements, ur last name - please adhere to the times to avoid large crowds. Breakout Session(s) Selected:

12099: Politics in Code Enforcement (Module One) (Concurrent Session) 9/30/2020 9:00 AM to 12:00 PM

12100 : Building Community Support for Code Enforcement (Module One) (Concurrent Session) 9/30/2020 1:00 PM to 4:30 PM

12101 : Managing the Daily Operations of a CEO (Module One) (Concurrent Session) 10/1/2020 8:30 AM to 4:30 PM

12102 : Inspecting, Planning, and Permitting for the Code Enforcement Officer (Module One) (Concurrent Session) 10/2/2020 9:00 AM to 12:30 PM

Enrollment Fees Price

Registration - 2.5 days (Full Conference) \$510.00

Total for This Item: \$510.00

Total Payment: \$510.00

Reference #R620023



## **Purchase Card Sign Out**

Date Checked Out: August 24, 2020				
Date Returned: August 24, 2020				
am signing out Newton County BOC's Finance purchase card. I will				
only use this card for county use. The purpose of using this card will be to purchase:				
Tracy Harnandez - GACE Conference Registration				
I agree to not spend more than \$250 on the purchase card unless I have prior approval by Finance to do so. I				
agree to return the card back to Finance as soon as possible after I have made my purchase(s) and within the				
same business day. I agree to return the card back to Finance by 5pm if I have not used the card. I agree to				
turn in all detailed receipts when I turn the card.				
Finance Approval if Over \$250: Estimated Amount: # 510 ° /				
Account Coding: 100 - 74100 - 523700				
Signature of Card User: Crysta Date: 08-24-2020				
Signature of AP Approver: Date: *If Needed				



PROMOTING **EXCELLENCE IN** GOVERNMENT

Welcome, Tracy Hernandez

#### CHECKOUT COMPLETE. THANK YOU!

#### Please print this confirmation page for your records.

Registrant: TRACY HERNANDEZ ZONING ADMINISTRATOR NEWTON COUNTY GOVERNMENT DEVELOPMENT SERVICES 1113 USHER STREET, SUITE 201 **COVINGTON GA 30014** (770) 784-2018

Payment: \$510.00 **PFLink Online** Invoice #125541 NEWTON COUNTY BOC 1113 USHER ST **COVINGTON GA 30014** 

#### **GACE Conference**

COD 190-00 Course:

1

Staff

Term: F2021

Section Number:

Instructor(s):

Schedule 12095 Number:

Location: Augusta Marriott, at the Convention Center, 2 Tenth Street, Augusta, GA 30901

Sep. 29, 2020 (Tue., 4:30 - 7 p.m.); Sep. 30, 2020 (Wed., 7 a.m. - 5 p.m.); Oct. 1, 2020 (Thu., 7 a.m. - 5 p.m.); Oct. 2, 2020 (Fri., 7 Dates:

a.m. - 12:30 p.m.)

Units: 0.0 CEUs

Contact

Hours:

0.0 Contact Hours

\*\*\*\*\*EARLY ONSITE REGISTRATION\*\*\*\* Due to COVID-19 and social distancing requirements, registration times will be staggered and your name badge, enrollment confirmation and packet of information will be on tables designated by the first letter of your last name - please adhere to the times to avoid large crowds. Tuesday, September 29: 4:30 p.m. - 7:00 p.m. (onsite registration will be staggered by last name): A-D: 4:30pm-5:00pm; E-I: 5:00pm-5:30pm; J-M: 5:30pm-6:00pm; N-R: 6:00pm-6:30pm; S-Z: 6:30pm-7:00pm. First Time Attendees; 4:30 p.m.-5:00 p.m. If you choose to wait until Wednesday morning to check-in, registration times will be as follows: A-F: 7:00am-7:30am; G-L:7:30am-8:00am; M-Z: 8:00-8:30am. \*\*\*First Time Attendees/New Members Meeting\*\*\*\* This meeting is MANDATORY. A meeting for first time attendees and new members to GACE will be held on Tuesday, September 29, at 6:00 p.m. The location will be provided during onsite registration. First time attendees should make arrangements to arrive by 4:30p.m. for onsite registration to attend the mandatory meeting at 6:00p.m. \*\*\*PARTICIPANT MATERIALS FOR CLASSES\* Handout materials will not be printed and handed out for the classes for this conference. The course materials will be posted to the following website on for you to access and download. www.cviog.uga.edu/gace If you want a hard copy of the material, you are responsible for printing a copy prior to the conference. PLEASE BRING MATERIALS WITH YOU TO CLASS AS WE WILL NOT HAVE THE ABILITY TO PRINT ONSITE. IF YOU WAIT TO PRINT ONSITE, YOU WILL BE RESPONSIBLE FOR PAYING THE COST OF PRINTING IN THE BUSINESS CENTER AT THE HOTEL. In addition, the Augusta Marriott does not offer complimentary Wi-Fi access in the classrooms. Please download and print your materials prior to the class. If you choose to download the material to your electronic device please do so before arriving at the conference. Course materials should be printed prior to arriving on site. There is a business center on site at the Augusta Marriott with the ability to print for a fee. If your course materials are not posted at the time you register, please continue to check back with the website. I have asked all instructors to have the materials to me so that they can be loaded by August 14. \*\*\*\*\*REMEMBER TO CHECK YOUR ENROLLMENT CONFIRMATION FOR YOUR CLASS SCHEDULE - MAKE SURE YOU ARE ENROLLED IN THE CORRECT CLASSES SO YOU CAN DOWNLOAD THE CORRECT MATERIALS NEEDED\*\*\*\* WE WILL NOT BE ABLE TO PRINT HANDOUTS ONSITE. IT IS YOUR RESPONSIBILITY TO MAKE

Notes:

SURE YOU CHECK YOUR COMPLETION CHECK AND CHOOSE THE CORRECT CLASSES.\*\*\*\*\*\* IF YOU NEED TO CHECK YOUR PROGRESS IN THE CERTIFICATE PROGRAM - ACCESS YOUR RECORDS ONLINE BY VISITING THIS WEB SITE: www.cviog.uga.edu/gace - scroll to the bottom of the page and click on "find out more information about how to access your training records." You will not be able to make changes to your class choices onsite. Please review your completion check to make sure that you are taking the appropriate class. Due to space limitations, the classes may fill up quickly, so it is best to review your completion check prior to completing registration information. We cannot guarantee your ability to register for a certain class. \*\*\*\* You can only \*\*\*\*Cancellation and receive credit for the same class one time, if you duplicate the class, you will not receive credit again.\*\* ™ Written notice of cancellation must be postmarked/dated no later than September 4, 2020, to receive a full refund Refund Policy\*\*\* of registration fees. Written requests postmarked/dated between September 5, 2020 and September 11, 2020 will be assessed a 25% administrative fee, and requests postmarked/dated after September 11, 2020 are not eligible for a refund. Registrants who fail to attend, cancel, or send a substitute will be liable for the full registration fee. Substitution of participant is encouraged over cancellation. To cancel registration or send a substitute, please send notification to Marci Campbell at mfp@uga.edu. \*\*\*\*BOARD OF REGENTS ATTENDANCE POLICY\*\*\* The Carl Vinson Institute of Government, a unit of the University of Georgia, and governed by the Board of Regents, provides continuing professional educational hours in several subject areas and certificate and/or certification programs. The Institute of Government is required by the Board of Regents to maintain an attendance policy during the training sessions. Attendance during your class sessions will be monitored and you are expected to be in your session at all times with the exception of scheduled breaks and meals. Credit will only be awarded to participants who adhere to the attendance policy and complete any other course requirements. ur last name - please adhere to the times to avoid large crowds.

Breakout Session(s) Selected:

12099: Politics in Code Enforcement (Module One) (Concurrent Session) 9/30/2020 9:00 AM to 12:00 PM

12100: Building Community Support for Code Enforcement (Module One) (Concurrent Session) 9/30/2020 1:00 PM to 4:30 PM

12101: Managing the Daily Operations of a CEO (Module One) (Concurrent Session) 10/1/2020 8:30 AM to 4:30 PM

12102: Inspect Session) 10/2/2020 9:00 AM to 12:30 PM

\$510.00 Registration - 2.5 days (Full Conference)

\$510.00 Total for This Item:

\$510.00 **Total Payment:** 

No. - - 0

Reference #R620094

**Enrollment Fees** 



## **Purchase Card Sign Out**

Date Checked Out: 910 2020
Date Returned: 910 2020
I Elizabeth Fracier am signing out Newton County BOC's Finance purchase card. I will
only use this card for county use. The purpose of using this card will be to purchase:
Part 1: Introductory Governmental accounting
I agree to not spend more than \$250 on the purchase card unless I have prior approval by Finance to do so. I
agree to return the card back to Finance as soon as possible after I have made my purchase(s) and within the
same business day. I agree to return the card back to Finance by 5pm if I have not used the card. I agree to
turn in all detailed receipts when I turn the card.
Finance Approval if Over \$250: 6 Estimated Amount:
Account Coding: 10015100 523760
Signature of Card User: Unfly Date: 9/10/2020
Signature of AP Approver: Date: *If Needed



Brittany White <bl/>
<br/>
blwhite@co.newton.ga.us>

#### Fwd: Georgia Center Registration Notification

1 message

Elizabeth Frazier <elizabethfrazier11318@gmail.com> To: "blwhite@co.newton.ga.us" <blwhite@co.newton.ga.us> Thu, Sep 10, 2020 at 4:52 PM

Forwarded message -

From: Georgia Center Registration < webreg@georgiacenter.uga.edu>

Date: Thu, Sep 10, 2020 at 4:50 PM

Subject: Georgia Center Registration Notification

To: <elizabethfrazier11318@gmail.com>



#### **Registration Notification**

Thank you! Your registration for the upcoming event is being processed. You will receive an email confirming your registration when all steps are completed. If you do not receive a confirmation email or letter, please contact us at registration@georgiacenter.uga.edu or (706) 542-2134.

Transaction ID: 249421 Registration ID: 308370

Time Received: 09/10/2020 16:49:56

Name: Amanda Elizabeth Frazier

Event: Introductory Governmental Accounting I

**Event Number: 51511** 

Local Government (State of Georgia) Employees: \$469

Total Fees: \$469.00

Thank you for your registration. We look forward to serving you. If you have questions regarding this registration, please reply to reg@georgiacenter.uga.edu or call us at null.



HOME

ROOMS

DNNG

THE UGA EXPER ENCE

CONFERENCES & EVENTS

CONTACT

MY CART (1)

#### Registration Notification

#### Thank you for your registration.

Your transaction number is: 249421

You will receive an email confirming your registration within 1 business day, but you may also print a copy of this page for your records.

Please use the contact information listed below for registration assistance.

#### **Introductory Governmental Accounting I - 51511**

Phone: null Phone: null

Email: reg@georgiacenter.uga.edu

We look forward to serving you!

Home | Contact Us | Privacy Statement

The University of Georgia Center for Continuing Education

## Newton County Purchase Card Activity Log



Cardholder Name 1	Nw ak aHughes
Department _	BOC
Last 4 Digits of Card	XXXX XXXX XXXX8691
Month	8/15th through 9/15th 2020

\*Must be completed if charge is for a meal.

Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
9/3/2020	Newton Chamber of Commerce	Registration for LunchLink State of the County Address for Chairman Banes	\$45.00	100 111000 523700	Lloyd Kerr, Bryan Fazio, Nwaka Hughes

Statement Total:

\$45.00

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Nwaka M. Hughes Mucks A
Cardholder Signature

T. Lloyd Kerr

9. Gollen

9/11/20 or County Manager)

Approval Signature (Department Head, Elected Official, or County Manager)

#### Nwaka M. Hughes

From:

info@newtonchamber.com

Sent:

Thursday, September 03, 2020 11:59 AM

Subject:

Online Payment Confirmation

Your online payment request has been received by Covington/ Newton County Chamber of Commerce.

#### **Payment Confirmation**

Name: Nwaka Hughes

Company: Newton Co. Board of Commissioners

Transaction Number: ch\_0HNKqNOaiKbG3VYIdrF7UjwS

Last 4 of Acct Number: 8691

Amount: \$45.00

Description	Item(s)	Quantity	Total Amount
Registration - LUNCH LINK SERIES for 2020	Attendees: 3	1	\$45.00
		Grand Total:	\$45.00

This Email was automatically generated. For questions or feedback, please contact us at:

#### **Covington/ Newton County Chamber of Commerce**

2101 Clark Street Covington, Georgia 30014

770-786-7510 770-786-7510

in fo@newton chamber.com

https://gocovington.com/

### SYNOVUS<sup>®</sup>

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

> CARD SERVICES P.O. BOX 2181 COLUMBUS GA 31902-2181

CARD SERVICES

Account NumberXXXX-XXXX-XXXX-8691

Payment Due

N/A

New Balance

N/A

Minimum Payment

N/A

NWAKA HUGHES NEWTON COUNTY BOC STE 204 1113 USHER ST NW COVINGTON GA 30014-2471

\*\* 0000000

762001148691

00000000

000000000

Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

#### Visa Account Summary

Account Number XXXX-XXXX-8691
Statement Closing Date September 15, 2020
Credit Line \$1,500.00
Available Credit N/A
Minimum Payment N/A
Payment Due Date XXXX-XXXX-8691
September 15, 2020
N/A

#### **Balance Summary**

 Previous Balance
 N/A

 Credits
 \$0.00

 Purchases and Debits
 \$45.00

 Cash Advances
 \$0.00

 FINANCE CHARGE
 N/A

 New Balance
 N/A

#### Important Contact Information

(See reverse side for billing and other important information)

Payment Address:

Card Services P.O. Box 2181 Customer Inquiries Address:

Commercial Customer Support

Columbus, GA 31902-2181

P.O. Box 23061

Columbus, GA 31902-3061

Pay Online:

www.commercialcardview.com

Customer Service:

1-888-SYNOVUS (796-6887)

TTY Telephone:

1-877-254-3568

#### Transaction Detail

 Trans
 Post Date
 Description
 Purchase Order No.
 Amount

 09/03
 09/04
 NEWTON COUNTY CHAMBER WWW.GOCOVINGT GA MEMO ITEM
 73682534
 \$45.00

#### Newton County Purchase Card Activity Log

Cardholder Name	Paul Gunter
Department	Sheriff 100-33100
Last 4 Digits of Card	5697

Month August 17, 2020 to September 15, 2020



\*Must be completed if charge is for

					a meal.
Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
8/18/2020	Ga POST Council	Application Fee/2269974585/Novel Ellis	\$32.00	100-33260-523700	-
9/2/2020	Post & Parcel	Equipment Return to Axon (TASERs)	\$30.03	100-33100-523230	

Statement Total:

\$62.03

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Cardholder Signature

Approval Signature (Department Head, Elected Official, or County Manager)

### Synovus<sup>®</sup>

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

> CARD SERVICES P.O. BOX 2181 COLUMBUS GA 31902-2181

CARD SERVICES

Account NumberXXXX-XXXX-5697
Payment Due N/A
New Balance N/A

Minimum Payment N/A

PAUL GUNTER
NEWTON COUNTY BOC
STE 204
1113 USHER ST NW
COVINGTON GA 30014-2471

\*\* 0000000

762000235697

00000000

000000000

Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

#### Visa Account Summary Balance Summary **Account Number** XXXX-XXXX-XXXX-5697 Previous Balance N/A Statement Closing Date September 15, 2020 Credits \$0.00 Credit Line Purchases and Debits \$1,000.00 \$62.03 Available Credit N/A Cash Advances \$0.00 Minimum Payment N/A **FINANCE CHARGE** N/A Payment Due Date N/A New Balance N/A Important Contact Information (See reverse side for billing and other important information) Payment Address: **Card Services Customer Inquiries Address:** Commercial Customer Support P.O. Box 2181 P.O. Box 23061 Columbus, GA 31902-2181 Columbus, GA 31902-3061 Pay Online: www.commercialcardview.com TTY Telephone: 1-877-254-3568 **Customer Service:** 1-888-SYNOVUS (796-6887)

#### Transaction Detail

Trans Date		Description	Purchase Order No.	Amount
08/18	08/20	GEORGIA PEACE OFFICER 770-7325604 GA	2269974585	\$32.00
09/02	09/03	POST & PARCEL COVINGTON GA	0000000009	\$30.03

## SYNOVUS<sup>®</sup>

### Your receipt from Xpress-Pay.com

#### mail@xpress-pay.com

Tue 8/18/2020 11:21 AM

To:Paul Gunter <pgunter@newtonsheriffga.org>;



Thank you for your payment. Please print this receipt and retain it for your records.

Payment date: Payer's email:

8/18/2020 11:21:31 AM

pgunter@newtonsheriffga.org

2269974585

Payment type:

Account:

\*\*\*\*\*\*\*\*5697

Transaction ID:

Amount Interest Total

Georgia Peace Officer Standards & Training Council

Administrative Fees, 8/18/2020 11:21:30 AM, Paul Gunter Newton County BOC, Newton County Sheriff's

Description

\$30.00

\$0.00

\$30.00

Office, Application Fee for Novel Ellis

Subtotal:

\$30.00

Site fee:

\$2.00

Payment total: \$32.00

The following charges will appear on your credit card or checking account statement: \$32.00: Georgia Peace Officer Standards & Training Council

### Georgia POST Order Confirmation

#### support@gpostc.org

Tue 8/18/2020 11:21 AM

To:Paul Gunter <pgunter@newtonsheriffga.org>;

Thank you for your order. Your credit card has been charged.

Order Receipt for Order 2108-00505 placed at 11:31 am on August 18, 2020 .

Items Selected Fee Quantity Total

Basic Certification Application Processing 30.00 1 \$30.00 Convenience Fee 2.00 1 \$2.00

ORDER TOTAL: \$32.00

Billing Information

First Name Novel MI L Last Name Ellis Address City Covington State GA

#### Zip 30014

Telephone ( 678 ) 345 - 2056 Email pgunter@newtonsheriffga.org

Comments I am making this payment on behalf of Novel Ellis, Newton County Sheriff's Office.

If you did not authorize this purchase please contact Georgia Peace Officer Standards and Training Council.

Officer Records		About P.O.S.T.   FAQ's   Related Links	Contact/Directions		
Agency Reports	Print Summa				
P.O.S.T. Act		for your order. Your credit eipt for Order 2108-00505 p			440 2020
Rules of the Council			iaced at 11:31 an	on Augus	18, 2020
Jpcoming Meetings	Items Select	ed	Fee	Quantity	Total
Applications & Forms	Basic Certifica	tion Application Processing	30.00	1	\$30.00
Council Members	_				
P.O.S.T. Certified Academies	Convenience F	Fee	2.00	1	\$2.00
Operational Staff	_		OF	RDER TOTAL:	\$32.00
P.O.S.T. Divisions			OI.	NDER TOTAL.	φ32.00
	Billing Info	rmation			
	First Name	Novel			
**Restricted Access**	MI	L,			
0	Last Name	Ellis			
Staff Intranet	Address				
	City	Covington			
	State	GA			
	Zip	30014			
	Telephone	( 678 ) 345 - 2056			
	Email	pgunter@newtonsheriffga.org			
	Comments	I am making this payment on beha	If of Novel Ellis, Newton	County Sheriff	s Office.

Copyright © 2009 Georgia Peace Officer Standards and Training Council P.O. Box 349 | Clarkdale, GA 30111 | 770-732-5974 | Fax 770-732-5952

# Georgia Peace Officer Standards and Training Council Receipt for Order 2108-00505 of 11:31 am on August 18, 2020 Thank you for your order. Your credit card has been charged.

Items Selected	Fee Q	uantity	Total
Basic Certification Application Processing	30.00	1	30.00
Convenience Fee	2.00	1	2.00
	ORDER	R TOTAL:	32.00

#### **Billing Information**

First Name Novel MI L

Last Name Ellis

Address 1113 Usher Street

City Covington

State GA Zip 30014

Telephone (678) 345 - 2056

E-Mail pgunter@newtonsheriffga.org

Comments

I am making this payment on behalf of Novel Ellis, Newton County Sheriff\'s

Office.

Post & Parcel 6215 Hwy 278 NV Covington, GA 30014 Phone (770)385-5689 Fax (770)385-6782

Shipment----

UPS Ground - Commercial

Ship To:

RMA Dept RMA 388147 Axom Enterprise, INC 17800 N 85TH ST ·

SCOTTSDALE, AZ 85255-6311

Package 1D: 151636

30,03

Tracking #: 12Y3370X0395021930 Expected arrival: Tue 09/08 11:59 PM

Actual Wt: 3.51 lbs

Rating Wt: 9 lbs

Pkg Dims: 15.00 x 13.00 x 7.00

SUBTOTAL

30.03

TAX

0.00

TOTAL

30.03

TEND Visa

30.03

Total shipments: 1

Newton County Sheriff Dept.

09/02/2020

#123360

02:06 PM

Workstation: 0 - Muster Workstation

POST\_PARCEL 6215 HĪGHWAY 278 NW COVINGTON, GA 30014

09/02/2020

14:06:35

CREDIT CARD

VISA SALE

XXXXXXXXXXXXXX5697 Card # Chip Card: **VISA CREDIT** A0000000031010 AIO: SEQ #: 662 Batch #: 9 INVOICE 005676 Approval Code: Chip Read Entry Method: Mode: Issuer Tax Amount: \$0.00

Cust Code:

SALE AMOUNT

\$30.03

**CUSTOMER COPY** 

# Newton County Purchase Card Activity Log

6	OUNT	
8		OE OE
IN I	E .	PAG
N,	7821	4

Cardholder Name	Randi Fincher	
Department	Finance- Purchasing	
ast 4 Digits of Card	3337	

Month August 2020 thru September 2020

\*Must be completed if charge is for a meal

					a meal.
Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
8/18/2020	Newton county Tax Commissioner	Tags for 2020 Dodge Durango, VIN 1780, 8198	\$7.09	100 33100 531160	
9/11/2020	Newton county Tax Commissioner	Tag fo 2020 KW Construction VIN# 0244.	\$105.36	100 35000 531160	
9/11/2020	Newton county Tax Commissioner	Tag for 2020 Ford Transit Van VIN# 1750	\$5.36	100 42200 531160	

Statement Total:

\$117.81

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Rame Finner
Cardholder Signature

Approval Signature (Department Head, Elected Official, or County Manager)



SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061



Account NumberXXXX-XXXX-XXXX-3337
Payment Due N/A
New Balance N/A

Minimum Payment N/A

CARD SERVICES P.O. BOX 2181 COLUMBUS GA 31902-2181

NEWTON CO PURCHASING NEWTON COUNTY BOC STE 204 1113 USHER ST NW COVINGTON GA 30014-2471 \*\* 0000000

762000573337

000000000

000000000

Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

#### Visa Account Summary

# Account Number XXXX-XXXX-3337 Statement Closing Date September 15, 2020 Credit Line \$20,000.00 Available Credit N/A Minimum Payment N/A Payment Due Date XXXX-XXXX-3337 Statement Closing Date September 15, 2020 September 15, 2020 N/A

#### Balance Summary

Previous Balance	N/A
Credits	\$0.00
Purchases and Debits	\$117.81
Cash Advances	\$0.00
FINANCE CHARGE	N/A
New Balance	N/A

#### Important Contact Information

(See reverse side for billing and other important information)

Payment Address: Card Services

P.O. Box 2181

Columbus, GA 31902-2181

www.commercialcardview.com

*TTY Telephone:* 1-877-254-3568

Customer Inquiries Address: Co

Commercial Customer Support

P.O. Box 23061

Columbus, GA 31902-3061

Customer Service: 1-888-SYNOVUS (796-6887)

#### Transaction Detail

Pay Online:

Trans Date	Post Date	Description	Purchase Order No.	Amount
08/18	08/19	NEWTON COUNTY TAX NOBLE CHICAGO IL	20081818470503356	\$1.09
08/18	08/19	NEWTON COUNTY MOTOR VEHIC COVINGTON GA	20081818470203356	\$6.00
09/11	09/14	NEWTON COUNTY TAX NOBLE CHICAGO IL	20091113455512374	\$4.72
09/11	09/14	NEWTON COUNTY MOTOR VEHIC COVINGTON GA	20091113455112374	\$106.00



#### **Order Receipt**

#### **Newton County Motor Vehicle 1**

Order Date: 08/18/2020 18:47:02 GMT Order ID: 2020081818470203356

#### Thank You For Your Order.

Sherift

Payment Amount: 6.00

Fee: 1.09

Order Total: 7.09

**Payment Details:** 

Name: NEWTON CO PURCHASING

Card #: 471553\*\*\*\*\*3337

Card Exp: 11/20 Card Type: VISA

Approval Code: 068877

Account Code 1: Account code 2:

X

# CICADOLA

#### GEORGIA MVD - RECEIPT (COPY)

#### STATE OF GEORGIA MOTOR VEHICLE REGISTRATION

NEWTON COUNTY BOARD OF COMMISSIONERS 1124 CLARK ST SW COVINGTON GA 30014-2364 2020 DODG MP 0380 Purchase Date: 12-Aug-2020 Application Date: 18-Aug-2020

 Fee
 Amount

 Plate Fee
 \$3.00

 \$3.00
 \$3.00

1C4SDJFT4LC381780 - 2020 DODG DURANGO MP Expires: GV4605P Tag Number: 3.00 Tag Fee: 770046296370038 Title Number: Gasoline Fuel: Newton County: District: 02 6500 GVW: No Farm Veh? BLACK Color: Equip No:

Classification: GO - Plate Government
Insurance Status: Valid Insurance Coverage
Customer 1 No: Customer 2 No:

Authentic Historical Plate:

NEWTON COUNTY BOARD OF COMMISSIONERS 1124 CLARK ST SW COVINGTON GA 30014-2364

Signature:

### STATE OF GEORGIA

MOTOR VEHICLE REGISTRATION

٦

Place

Decal

Here

DANA DARBY Newton County Tax Commissioner 1113 USHER ST STE 101 COVINGTON GA 30014-2439 (770) 784-2020

NEWTON COUNTY BOARD OF COMMISSIONERS 770046296370038 0380 Purchase Date: 12-Aug-2020 App@cflort Odie:78-FAG-F020 
 Fee
 Amount

 Plate Fee
 \$3.00

 \$3.00
 \$3.00

1C4SDJFT4LC381780 - 2020 DODG DURANGO MP GV4605P Expires: Tag Number: 3.00 Tag Fee: 770046296370038 Title Number: Gasoline Fuel: Newton County: 02 District: 6500 GVW: No Farm Veh? BLACK Color: Equip No: GO - Plate Government Classification:

Insurance Status: Valid Insurance Coverage
Customer 1 No:
Customer 2 No:

Authentic Historical Plate:

NEWTON COUNTY BOARD OF COMMISSIONERS 1124 CLARK ST SW COVINGTON GA 30014-2364

Signature:

v – v

٨

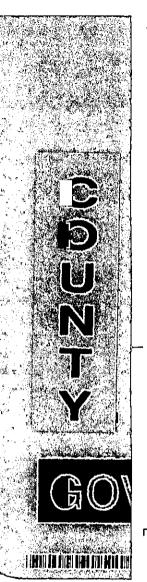
CCARD

THIS IS NOT A BILL
THIS IS YOUR RECEIPT
\*\*\* RETAIN FOR TAX PURPOSES





>



#### GEORGIA MVD - RECEIPT (COPY)

#### STATE OF GEORGIA MOTOR VEHICLE REGISTRATION

Color:

NEWTON COUNTY BOARD OF COMMISSIONERS	Fee	Amount
1124 CLARK ST SW COVINGTON GA 30014-2364 2020 DODG MP 0380 Purchase Date: 12-Aug-2020 Application Date: 18-Aug-2020	Plate Fee	\$3.00 \$3.00

1C4SDJFT0LC368198 - 2020 DODG DURANGO MP GV4606P Expires: Tag Number: 3.00 770046296455038 Tag Fee: Title Number: Gasoline Newton Fuel: County: District: 02 GVW: 6500 Farm Veh? No BLACK

Equip No: GO - Plate Government Classification: Insurance Status: Valid Insurance Coverage

Customer 2 No: Customer 1 No:

Authentic Historical Plate:

**NEWTON COUNTY BOARD OF COMMISSIONERS** 1124 CLARK ST SW **COVINGTON GA 30014-2364** 

Signature:		
Signature	 	

#### STATE OF GEORGIA MOTOR VEHICLE REGISTRATION

Here

1C4SDJFT0LC	368198 - 2020 DODG	DURANGO	MP
Tag Number: Title Number:	GV4606P 770046296455038 Newton	Expires: Tag Fee: Fuel:	3.00 Gasoline
County: District:	02		
Farm Veh?	No	ĠΛM:	6500
Equip No:		Color:	BLACK
Classification: Insurance Statu	GO - Plate Governn s: Valid Insurance Co	verage	
Customer 1 No: Authentic Historical Plate:		Customer 2 No:	
11(010110011111111111111111111111111111			

NEWTON COUNTY BOARD OF COMMISSIONERS 1124 CLARK ST SW **COVINGTON GA 30014-2364** 

Signature:	 	 	

DANA DARBY Newton County Tax Commissioner 1113 USHER ST STE 101 **COVINGTON GA 30014-2439** (770) 784-2020

	EWTON COUNTY BOARD OF
C	OMMISSIONERS
7	70046296455038
0	380
Р	urchase Date: 12-Aug-2020
	pplicalibudDate:78-349:2020
	40 47 99 1

Fee	Amount
Plate Fee	\$3.00
	\$3,00

<b>/</b>	-	٧			
			<		
	4		I	CCARD	

THIS IS NOT A BILL THIS IS YOUR RECEIPT \*\*\* RETAIN FOR TAX PURPOSES

#### Order Receipt

#### **Newton County Motor Vehicle 1**

Order Date: 09/11/2020 13:45:51 GMT Order ID: 2020091113455112374

Thank You For Your Order.

Payment Amount: 106.00

Fee: 4.72

Order Total: 110.72

Payment Details:

Name: NEWTON CO PURCHASING

Card #: 471553\*\*\*\*\*3337 Card Exp: 11/20

Card Type: VISA

Approval Code: 040736

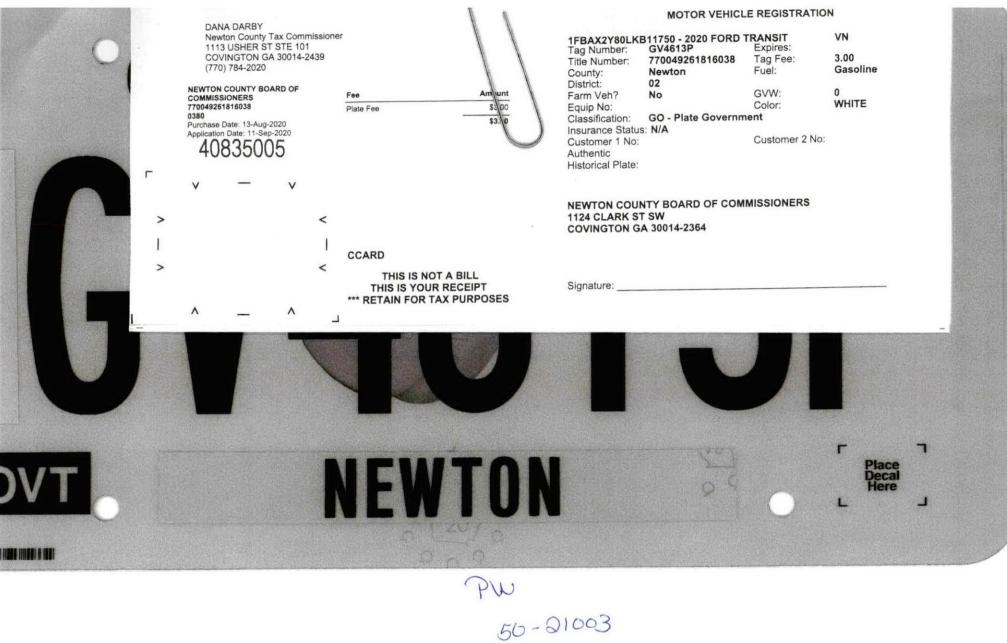
Account Code 1: Account code 2:

X\_\_\_\_\_

Signature

and the foregon of	STATE OF MOTOR VEHICLE		
DANA DARBY Newton County Tax Commissioner 1113 USHER ST STE 101 COVINGTON GA 30014-2439 (770) 784-2020	1NKDLP0XXLR360244 - 2020 KW CON Tag Number: GV4614P Title Number: 770027218125038 County: Newton District: 02	NSTRUCTION TK Expires: Tag Fee: 3.00 Fuel: Diesel	
NEWTON COUNTY BOARD OF COMMISSIONERS  770027218125038	nt Farm Veh? No	GVW: 66000 Color: WHITE	
0380	Equip No: Classification: GO - Plate Governme		
Application thans: 41 Sept. 2020	Insurance Status: N/A	Customer 2 No:	
41201000	Authentic Historical Plate:	Customer 2 No.	
v – v	ristorical riate.		
> <	NEWTON COUNTY BOARD OF COMM 1124 CLARK ST SW COVINGTON GA 30014-2364	ISSIONERS	
	60VINGTON GA 30017-2307		
> < CCARD			
THIS IS NOT A BILL THIS IS YOUR RECEIPT	Signature:		
*** RETAIN FOR TAX PURPOS			
^ _ ^ _			
JUNE	91		
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			Place Decal
ONET	TIUN		Here J
	O Maria de la Caracteria de la Caracteri		

Fine 45-20008



# Newton County Purchase Card Activity Log



Cardholder Name	Sammy Banks
Department	Sheriff 100-33100
Last 4 Digits of Card	4808

Month August-September 2020

\*Must be completed if charge is for a meal.

					a meal.
Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
8/22/2020	Office Depot	Strip Magnets	\$69.34	100-33100-521100	531100
8/28/2020	BJ's	Snacks/Drinks for Protest Operation	\$104.73	100-33100-531300	NCSO Employ. (SWAT/ Command staff/SRO/Call in deputies) - 70 peop
	2				
				,	

Statement Total:

\$174.07

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Cardholder Signature

Approval Signature (Department Head, Elected Official, or County Manager)

### Synovus<sup>®</sup>

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

# CARD SERVICES

CARD SERVICES P.O. BOX 2181 COLUMBUS GA 31902-2181. Account NumberXXXX-XXXX-4808
Payment Due N/A
New Balance N/A
Minimum Payment N/A

SAMMY BANKS NEWTON COUNTY BOC STE 204 1113 USHER ST NW COVINGTON GA 30014-2471 \*\* 0000000

760038064808

00000000

00000000

Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

#### Visa Account Summary

Account Number XXXX-XXXX-4808
Statement Closing Date September 15, 2020
Credit Line \$2,500.00
Available Credit N/A
Minimum Payment N/A
Payment Due Date XXX-XXXX-4808

#### Balance Summary

 Previous Balance
 N/A

 Credits
 \$0.00

 Purchases and Debits
 \$174.07

 Cash Advances
 \$0.00

 FINANCE CHARGE
 N/A

 New Balance
 N/A

#### Important Contact Information

(See reverse side for billing and other important information)

Payment Address:

Card Services

P.O. Box 2181

Columbus, GA 31902-2181

www.commercialcardview.com

TTY Telephone:

Pav Online:

1-877-254-3568 Customer

Customer Inquiries Address:

Commercial Customer Support

P.O. Box 23061

Columbus, GA 31902-3061

Customer Service:

1-888-SYNOVUS (796-6887)

#### Transaction Detail

Trans Date	 Description	Purchase Order No.	Amount
08/22	OFFICE DEPOT #360 SNELLVILLE GA	036020200822	\$69.34
08/28	BJS WHOLESALE #0150 CONYERS GA		\$104.73



apply. See store or visit officedepot.com for full Office DEPOT Office Max

VIB 15 SNELLVILLE - (770) 736-3553 8 tot Jaisos 08/22/2020 4:03 PM yns tot emit



SALE

360-5-1976-884872-20.7.2

Subtotal:

69.34

Order Management Invoice # 1193100530015

Approval Code: 999999

114318 UDA GMILL ORDE Statts 2 00 69.34 E

Total:

UOV 9286 Visa 4808: original packaging for a refund a sall

69.34

AUTH CODE 038388 que ecitico not eyeb 00 nichtiw

TDS Chip Read to tener or benegonu ils AID A0000000031010 VISA CREDIT ypolondosi furniture. Open software, CDs, E000800008 SVT

CVS No Signature Required to ed yam some only. Special orders are not returnable. See

Tech Depot™ Services Terms and Conditions Shop online at www.officedepot.com 

HUT TO THE WANT TO HEAR FROM YOU! Visit survey.officedepot.com elistab and enter the survey code below: bebnard ×15R1 5EN9 G88D qed eomo

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

Office Depot and OfficeMax Brand products (excluding lnk & toner) may be returned at any

time for any reason, with original receipt, for a

#### Office DEPOT

**Customer Information** 

Customer Name: Customer Ph#:

**NEWTON CO SHERIFF OFF** 

Customer ID:

678-625-1421 25120464

Deliver To:

NEWTON CO SHERIFF OFF

15151 ALCOVY RD

Order Information

Order Number: 119310053-001 Order Date: 8/22/20 4:02 pm

Delivery Date:

8/25/20

Store: Payment: 0360

In-Store

Order Details

SKU	Description	Qty Ordered	Qty Filled	Price/Unit	Extended Price
BVCFM2401	MAGNETS, DE, STRP, 7/8X	4		12.09	
BVCFM2404	MAGNETS, DE, STRP, 7/8X	2		10.49	



Subtotal: \$69.34 Other Charges:

Del Charge: Tax:

Total Due:

\$69.34

Or, call our Customer this inveignte any register for payment processing.

To check the status of your order, 24 hours a day, 7 days a week, please visit https://www.officedepot.com/orderhistory and enter your order number and phone number Or, call our Customer Service Center at 1-800-GO-DEPOT(1-800-463-3768).

Thank you for shopping at Office DEPOT



1000 DUG-2010 (R S) CONYH 3, th 770) 7:1-2:58 Gen Mar. Dana Mallings

Club:150 Reg:51 Inara 8346 Cashier:601 08/28/26 02:16pm

CASH CREDT DBIT Day Y 11.96 A 88867003403 WI- IOPK 4 @ 2.99 RALLBOW. 37.47 A 5200012242 3 @ 12.49 9.69 A 4400004703 ORI 17 301 7641090149 LA 19.58 A 2 @ 9.79 ORI CHPILIY6 11.99 A 4400004615 CHZ ITHM 10.99 A 2410071717 101.68 \*\*\*\* SUB!OTAL 3.05 GA 3% Tax

\*\*\*\*\*\*\*\*\* 4808

\*\*\*\* TOTAL

Purchase O( APPROVI D

AUTH 015453

TERMINAL NUMBER 78/73015/051 08/28/20 02/19pm 15/0 51 8344 601

VISA CREDIT

AID: A0000000031011 CVM RESULTS: 5E0000 AC: C088A946511EF1 89

IAD:

TVR: 80000(%000 TSI: 6800

ENTRY: C

(Signature Not Required)

CID: 80

Vis .

104.73

104.73

CHENGE

0.00

TOTAL ITEMS= 12

By being a BJ's MEMBER

I JUST SAVED: \$20.34

# Newton County Purchase Card Activity Log

(0	OUNT	r
8		GEC
THE THE	lies I	RO
N	* 1821	*4

Cardholder Name	Scharita J. Greene
Department	Juvenile
Last 4 Digits of Card	5866
Month	17-Sen

\*Must be completed if charge is for a meal.

					a IIIGal.
Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
	200.	Small, Medium, and Large Trash Bags	***	1007/000 52/10	
8/17/2020	Walmart	for 8205 Hazelbrand Road	\$24.78	1002600053110	)
			_		
			1		
	The second secon			1	

Statement Total:

\$24.78

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Cardholder Signature

Approval Signature (Department Head, Elected Official, or County Manager)

## SUVONYS

SUVONYS

**SERVICES** 

P.O. BOX 23061

A/N Account NumberXXXX-XXXX-5866

A/N A/N New Balance Payment Due

000000000

P.O. BOX 2181 CARD SERVICES

Minimum Payment

1113 USHER ST NW STE 204 **NEWTON COUNTY BOC** SCHARITA J GREENE

99855500292 000000000

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

Balance Summary

Payment Due Date Minimum Payment Available Credit **Credit Line** Statement Closing Date

Customer Service:

www.commercialcardview.com

1-877-254-3568 Columbus, GA 31902-2181

\*\*\*\*\*\*\*\*\* WEWO ILEM \*\*\*\*\*\*\*\*\*\*

08/17 08/18 WAL-MART #0459 COVINGTON GA

: auoydələ I XII Pay Online:

Trans Post

Date Date Description

Transaction Detail

Columbus, GA 31902-3061 P.O. Box 23061 Commercial Customer Support

0817200459

Order No.

Purchase

P.O. Box 2181

Customer Inquiries Address:

Card Services

Payment Address:

(See reverse side for billing and other important information)

A\N A/N

(7883-367) SUVONYS-888-1

87.42\$

JunomA

A/N

New Balance FINANCE CHARGE Cash Advances 00.0\$ Purchases and Debits \$24.78 Credits 00.0\$

Previous Balance

A/N A/N A\N 00.000,8\$

Important Contact Information

Visa Account Summary

September 15, 2020

9989-XXXX-XXXX-XXXX

Account Number

Please Detach and Return With Your Payment

COVINGTON GA 30014-2471

0000000 \*\*

COLUMBUS GA 31902-2181

COLUMBUS GA 31902-3061

SYNOVUS BANK

JunomA	Billable	State	City	Merchant Name	Transaction Date	Posting Date
87.42	ON	₽Đ	СОУІИСТОИ	WAL-MART #0459	8/11/5050	8\18\5020

```
***CUSTOMER COPY***

***CUSTOMER COPY***

***CUSTOMER COPY***

***CUSTOMER COPY***

***CUSTOMER COPY***

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***CUSTOMER COPY**

***CUSTOMER COPY**
```

Thank you! 10 #:7P9J6W423Y2

Give us feedback @ survey.walmart.com

# Newton County Purchase Card Activity Log

Cardholder Name	Teresa Williams
Department	Senior Services
Last 4 Digits of Card	3083
Month	August 15, 2020 thru September 14, 2020



\*Must be completed if charge is for a meal.

			Internal contract to the second of	1	a IIIGal.
Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	"Meal Attendees
8/18/2020	Blockers Soul Food	FOOD	\$500.00	100-55200-531300	
8/23/2020	BJs Wholesale	FOOD	\$80.06	100-55200-531300	
8/24/2020	Food Depot	FOOD	\$18.23	100-55200-531300	
8/25/2020	Jimmy Jihns	Sub Sandwiches	\$181.00	100-55200-531300	
8/30/2020	Food Depot	FOOD	\$61.41	100-55200-531300	
8/31/2020	Food Depot	FOOD	\$41.47	100-55200-531300	
8/31/2020	Food Depot	FOOD	\$94.30	100-55200-531300	
9/4/2020	Food Depot	Hamburger Buns	\$14.90	100-55200-531300	
9/4/2020	Food Depot	Food	\$41.59	100110005313000CRF2	
9/9/2020	Chic-Fil-A	Sandwiches	\$14.10	100110005313000CRF2	
9/11/2020	Little Caesars	Pizza	\$86.00	100-55200-531300	
9/14/2020	Ingles	FOOD	\$106.14	100-55200-531300	

\$1,239.20

I herby confirm that all purchases stated ab	ve follow all purchasing	card policies and procedur
--	--------------------------	----------------------------

Cardholder Signature

Approval Signature (Department Head, Elected Official, or County Manager)

### ZVOVT IS<sup>®</sup>

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

**CARD SERVICES** P.O. BOX 2181 COLUMBUS GA 31902-2181 Services

Account NumberXXXX-XXXX-XXXX-3083 Payment Due N/A

New Balance N/A N/A Minimum Payment

**TERESA WILLIAMS NEWTON COUNTY BOC STE 204** 1113 USHER ST NW **COVINGTON GA 30014-2471**  \*\* 0000000

762000463083

000000000

000000000

Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

N/A

N/A

N/A

#### Visa Account Summary

XXXX-XXXX-XXXX-3083 Account Number Statement Closing Date September 15, 2020 Credit Line \$2,000.00 Available Credit Minimum Payment Payment Due Date

#### **Balance Summary**

Previous Balance N/A Credits \$0.00 \$1,239,20 Purchases and Debits Cash Advances \$0.00 **FINANCE CHARGE** N/A New Balance N/A

#### Important Contact Information

(See reverse side for billing and other important information)

Payment Address:

Card Services P.O. Box 2181 Customer Inquiries Address:

Commercial Customer Support

P.O. Box 23061

Columbus, GA 31902-3061

Pay Online:

TTY Telephone:

www.commercialcardview.com 1-877-254-3568

Columbus, GA 31902-2181

Customer Service:

1-888-SYNOVUS (796-6887)

#### Transaction Detail

Trans Date	Post Date	Description	Purchase Order No.	Amount
08/18	08/20	BLOCKERS SOUL FOOD RESTAU COVINGTON GA		\$500.00
08/23	08/24	BJS WHOLESALE #0150 CONYERS GA		\$80.06
08/24	08/25	FOOD DEPOT/COVINGTO COVINGTON GA	06137170044VPRY7020928237	\$18.23
08/25	08/26	JIMMY JOHNS - 2738 COVINGTON GA		\$181.00
08/30	08/31	FOOD DEPOT/COVINGTO COVINGTON GA	06137170044VPRY7020922813	\$61.41
08/31	09/01	FOOD DEPOT/COVINGTO COVINGTON GA	06137170044VPRY7020931213	\$41.47
08/31	09/01	FOOD DEPOT/CONYERS CONYERS GA	06137170043VPRY7020931188	\$94.30
09/04	09/07	FOOD DEPOT/COVINGTO COVINGTON GA	06137170044VPRY7021093230	\$56.49
09/09	09/11	CHICK-FIL-A #04285 COVINGTON GA	03844624285VPTY7042616901	\$14.10
09/11	09/14	LITTLE CAESARS 3153-0002 COVINGTON GA		\$86.00



#### Continuation of Statement

TERESA WILLIAMS
NEWTON COUNTY BOC
Account Number XXXX-XXXX-XXXX-3083

#### Transaction Detail

Trans	Post		Purchase	
Date	Date	Description	Order No.	Amount
				4.4 A
09/14	09/15	INGLES MARKETS #452 COVINGTON GA	00610480452VLPY7020252117	\$106.14
		******** MEMO ITEM ********		



Posting Date	Transaction Date	Merchant Name	City	State	Billable	Amount
8/20/2020	8/18/2020	BLOCKERS SOUL FOOD RESTAU	COVINGTON	GA	ИО	500
8/24/2020	8/23/2020	BJS WHOLESALE #0150	CONYERS	GA	NO	80.06
8/25/2020	8/24/2020	FOOD DEPOT/COVINGTO	COVINGTON	GA	NO	18.23
8/26/2020	8/25/2020	JIMMY JOHNS - 2738	COVINGTON	GA	NO	181
8/31/2020	8/30/2020	FOOD DEPOT/COVINGTO	COVINGTON	GA	NO	61.41
9/1/2020	8/31/2020	FOOD DEPOT/CONYERS	CONYERS	GA	NO	94.3
9/1/2020	8/31/2020	FOOD DEPOT/COVINGTO	COVINGTON	GA	NO	41.47
9/7/2020	9/4/2020	FOOD DEPOT/COVINGTO	COVINGTON	GA	NO	56.49
9/11/2020	9/9/2020	CHICK-FIL-A #04285	COVINGTON	GA	NO	14.1
9/14/2020	9/11/2020	LITTLE CAESARS 3153-0002	COVINGTON	GA	NO	86
9/15/2020	9/14/2020	INGLES MARKETS #452	COVINGTON	GA	NO	106.14



# Clome of the blassing Dressing

6129 US 278 NW. Covington GA. 30014 (678) 660-3765

Date:	8/18/2020		Invoice	2027	
Date of Event:		8/18/2020	Bill To:	Newton County Senior	Services
			Name:	Freda Reed	
		5	Address:	6183 Turner Lake Road	1
	,	ALPYIA MAA		Covington, GA. 30014	
		· ·	Phone:	770 784-2174	
	3				-
Descrip	Description of Services:		Portion	s to Prepare:	100
Chicken T	enders	-	•-		
Yellow Ric	e				
Dinner Ro	il .				
Brooccli S	alad				
		et is			

BLOCKERS SOUL FOOD RESTAURANT LLC 6129 HWY 278 NW STE 4 COVINGTON, GA 30014 687-660-3765

August 18, 2020 at 12:06 PM

#### nrnfr # 1002

Admin

CATERING DEPOSIT	500.00
Subtotal	500.00
Tax	0.00
Discount	0.00
Total	500.00
Visa3083	500.00
Total Tender	500.00
Change	0.00

	PRICE PER PERSON	\$5.00
	Total Amount	\$500.00
_		
***		
學 議		
1		
名がある		
X8.7.00		
Select		
Transaction and a	Sub Total:	\$500.00
1	Sales Tax 7.00% (GA)	\$0.00
	Total:	\$500.00
	Catering Fee 18%	\$0.00
	Total Due:	\$500.00
-	Deposit:	\$0.00
	Balance Due:	\$500.00
,		



1800 DØGWOOD DR SE CØNYERS, GA (7/10) 761-2358 Gen Mer Donna Stallings

kes:79 Trans:7830 Cashie 5355 08/23/20 06:57<sub>PM</sub> 不够 化二氯化物医氯甲酰胺基酚

***	MEMBERSHIP	ID.	ID. 15080436408		408	***	
***	MEMBERSHIP	EXP.	IRES	ON	08/21	***	
****	*****	****	<del>(</del> ***	***	*****	(****	
	004703 9.69	OREO	30CT	72	38	3.76 A	
	010069 i 12.99	PRING	ORG	48	38	97 A	
GA 3	*** SUBTOTAL ** Tex *** TOTAL				2	. 73 . 33	

\*\*\*\*\*\*\*\*\*3083 Purchase 00 APPROVED AUTH 094755 TERMINAL NUMBER 78073015079 08/23/20 06:58pm 150 79 7830 376355 VISA CREDIT AID: A000000031010

CVM RESULTS: 5E0000 AC: 2888418685965E5A IAD particular and a second

TVR: 8000008000

TSI: 6800 ENTRY: C

(Signature Not Required)

CID: 80

Visa 80.06 CHANGE

TOTAL ITEMS 7

By being a BJ's MEMBER I JUST SAVED: \$15.55

\*\*\*\*\*\*\*\*\*\*\* My Yearly Savinss @ 08/22/20

## Food Depot #44

Covington, GA 770-787-2622 Cashier: WILLIE C.

MT OLIVE PICKLES KOSHR S 8 @ \$2.01	16.08 TFA
SUBTOTAL COST PLUS SA 10.00% 17.69 FOOD TAX TOTAL CREDIT CARD CREDIT ACCT	16.08 1.61 0.54 18.23 18.23 0.00

Item Count 8

Thanks!!!

Date	Time	Lane	Clerk	Trans #
08/24/20	08:18	AM 3	179	3
				eger er er e

# Food Depot #44 6169 Hwy 278 N Covington, GA 770-787-2622

Cashier: VIKKI V

BAR S BAR S OATMEAL OATMEAL OATMEAL OATMEAL OATMEAL OATMEAL OATMEAL OATMEAL	JUMBO BEEF FRANKS JUMBO BEEF FRANKS JUMBO BEEF FRANKS PIES PIES PIES PIES PIES PIES PIES PIE	13.21 TFA 13.21 TFA 13.21 TFA 1.25 TFA 1.25 TFA 1.25 TFA 1.25 TFA 1.25 TFA 1.25 TFA
OATMEAL RESER'S RESER'S RESER'S RESER'S RESER'S	PTES CHOPPED COLE SLAW	1.25 TFA 0.99 TFA 0.99 TFA 0.99 TFA 0.99 TFA
TAX EXE	MPTED COLE SLAW	-1.86 TE

SUBTOTAL COST PLUS SA	10.00%	55.83 _5.58
TOTAL		61.41
CREDIT CARD		61.41
CREDIT ACCT		0.00

Item Count 17

Thanks!!!

Date 08/30/20	Time 10:53 AM	Lane	Clerk 210	Trans i	ij.
	ነል፣ <b>ፈ</b> ንፋ፣ፈነ	7.4.Y.	412/212		•

Jimmy Johns #2738 3283 Highway 278 NE 678-712-6981

08-25-2020 Chk# 2 Open 8:06 AM Tkr 72 Reg# 4 10:51 AM

### -- Ready At 11:00 AM --

2	48Pc Party Box (C) 181.00
2	NO MAYO ALL
	#4 Turkey Tom
	. #4 Turkey Jom
	#4 Turkey Tom
-	.#4 Turkey Tom .#4 Turkey Tom
	.#4 Turkey Tom
	.#4 Turkey Tom .#4 Turkey Tom
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	, #4 Turkey Tom
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	.#4 Turkey Tom
V	- 30Pc Panty Box (C) (56.99) VOID
	NO MAYO ALL VOID
٧-	#4 Turkey Tom <b>VOI</b> D
-V	- ,#4 Turkey Tom VOID
٧	#4 Turkey Tom VOID
	#4 Turkey Tom VOID
	- #4 Turkey Tom VOID
	#4 Tunkey Tom VOID
٧-	+ . #4 Turkey Ton VOID
٧-	#4 Turkey Tom VOID
-V	一一一行。在1880年,1980年,1980年,1980年,1980年,1980年,1980年,1980年,1980年,1980年,1980年,1980年,1980年,1980年,1980年,1980年,1980年,1
1 O	#4 Turkey Tom
IUI . o	TAKE mayo packets
50	TAKE mustard packet\$

Subtota 181.00 Sales Tax (7.%) Exempt

Total \$ 181.00

\*\*\* PAID \*\*\*

Credit Tendered 181.00 Tip 0.00

Food Depot #44
6169 Hwy 278 N
Covington, GA
770-787-2622
Cashier: SUE E.

BELL PEPPER BUSH BAKED BEANS #10 BUSH BAKED BEANS #10 F.D.HOT DOG BUNS 12CT KRAFT BBQ SC SWT HNY * You Saved \$0.39 KRAFT BBQ SC SWT HNY * YOU Saved \$0.39 OATMEAL PIES	0.82 TFA 1.25 TFA
RESER'S CHOPPED COLE SLAW RESERS CHOPPED SLAW RESERS CHOPPED SLAW RESERS CHOPPED SLAW SWEET ONIONS	0.99 TFA 1.66 TFA 1.66 TFA
0.01 LB @ \$99.99/LB	
TAX EXEMPTED	-1.26 TE

COST PLUS SA TOTAL	10.00%	37.70 3.77
CREDIT CARD CREDIT ACCT		41.47 41.47 0.00

You Saved \$0.78

Item Count 20

### Thanks!!!

Date	Time	Lane	Clerk	Trans #
08/31/20	12:15 PM	1	143	126

Food Depot #44

6169 Hwy 278 N
Covington, GA
770-787-2622
Cashier: TIARRA W.

3 - PRODUCE BAG ORANGES ESSEVYDY APPLE JC 10CT * You Saved \$0.51	2.59 TFA 4.68 TFA 2.89 TFA
ESSEVYDY APPLE JC 10CT	2.89 TFA
F.D.HAMBURGER BUNS 12CT	14.90 TFA
GEN MILLS CHERRIO HNY CUPS KELLOGG APLJKS CRL INACUP * You Saved \$0.13 KELLOGG APLJKS CRL INACUP * You Saved \$0.13 KELLOGG APLJKS CRL INACUP * You Saved \$0.13 KELLOGG FRSTFLK CRL INACUP * You Saved \$0.13 KELLOGG FRSTFLCOP CERL CUP * You Saved \$0.13 KELLOGG FRST LOOP CERL CUP * You Saved \$0.13 KELLOGG FRST LOOP CERL CUP * You Saved \$0.13 KELLOGG FRST LOOP CERL CUP * You Saved \$0.13 KELLOGG FRST LOOP CERL CUP * You Saved \$0.13 KELLOGG FRST LOOP CERL CUP * You Saved \$0.13 KELLOGG FRST LOOP CERL CUP * You Saved \$0.13 KELLOGG FRST LOOP CERL CUP	0.78 TFA
* You Saved \$0.13 KOOL-AID JAMRS ORANGE 10CT KOOL-AID JAMRS ORANGE 10CT KOOLAID JAMMER KOOL-AID JAMMERS GRAPE TAX EXEMPTED	1.87 TFA 1.87 TFA 1.87 TFA 1.87 TFA -1.71 TE
SUBTOTAL COST PLUS SA 10.00% TOTAL CREDIT CARD CREDIT ACCT	51.35 5.14 56.49 56.49 0.00
You Saved \$3.10 Item Count 38	3
Thanks!!!	

Date Time Lane Clerk Trans # 09/04/20 12:02 PM 6 195 42

Welcome to Chick-fil-A Covington FSR (# 04285) Covington, GA Operator: Chris Giella

> CUSTOMER COPY 9/9/2020 12:11:32 PM DRIVE THRU

Order Number:

1294292

1	Mea1-CFASan CFA Sand	6.59
	Fries MD Coke MD	
1	Meal-CFASan CFA Sand Fries MD Sprite MD	6.59
2 2 2	Poly	0.00 0.00 0.00

We'd like to offer you a free Chick-fil-A Chicken Sandwich (Original or Spicy) as a thank you for completing our survey within 2 days of your visit.

### www.mycfavisit.com

Serial Num: 2920210-04285-1211-0909-01

At the end of the survey, your email will be required in order for us to send your free sandwich offer.

			\$13.18
•			\$0,92
			\$14.10
			\$0.00
			\$14.10
Tran	Seq	No:	1294292
derfu to Sca	l day an?	<i>'</i> .	
	ure se derfu to Sca	ure servir derful day to Scan?	Tran Seq No: ure serving yo derful day. to Scan? .com/forgot2sc

Sep 9 2020 12:09 pm

Card Number

: \*\*\*\*\*\*\*\*\*\*\*3083

Card Type Approval

: VISA : 026838

AID : A000000031010

O D TOTAL	MTCHLGHT	ر الم	₹₽	<b>\$3</b>	BAR	ŝ	웃
٠		DAY TWL AWESOME 8 aved \$0.59	ABO JMBO CLAS	O JMBO CI AS			
	8.13 N A	1.17 TFA 4.99 N A		<u>-2</u> :		<u> </u>	2

82.70 8.27 2.32 1.01 94.30 0.00

Date 08/31/20 12:43 PM 7 44 18

Thanks!!!

You Saved \$0.59 Item Count 10

70	Taxab Sales	iten (	9 (2) ≤ (1)	(4) 3 (A) 1				
	Sales Tax	tem Count	Classic Cheese Veggie	(4) 3 Meat Treat (4) 1 Classic Pepperon			newton	
. 44 			Chees	Peppe		, un	E	
			ñó	ren.			nty se i, Sep ashiar	0rder
						SALE	nior s 11, 2	#294
						in i	county Senior Services Fri, Sep 11, 2020 11:02am Freshiar Doday is Kel-Asia B	Order #294 SEE
4							1:02am e: Asi	. 770
						7.50 - 31	# **	-787-(
\$86								028
\$86.00	\$6.02	\$86.00	\$20.00	\$20.00	Price			
0	~	001						

### ittle Gaesars

Store ID 03153-00002

# Low Prices...Love The Savings!

2 @ 6.98 B ローアのアル 4 e 0.88 6 @ 2.19 A M.W.BM.SR.CORN 7173 TURNER LAKE RD COVINGTON, GA STORE #452 770 787-8231 STORE MANAGER: Keith Morrison YOUR CASHIER TODAY WAS Donny B LEMON CREME CA ADVANTAGE CUSTOMER 2 @ 6.98 8 @ 2/6.00 2 @ 2.48 4 回 1.98 TAX #### BALANCE SAVAN HUSHPUPP HEAD LETTUCE MATURE SPINA CUCUMBERS LL SLI ONION R VANILLA CREME CHOCOLATE CRM RED GRAPE TO LL ONION RINGS 13.96 B 13.14 B 24.00 B 13.96 B 6.98 B 7.92 B 2.84 B 3.52 4.96 B 1.48 B 8.94 B

Purchase ACCT # \*\*\*\*\*\*\*\*\*\*3083 AMT: \$106.14 AID: A000000031010 APPROVAL CODE: 077638 CHANGE 106.14 0.00

A - GA 3%
B - GA 7%
TOTAL TAX
TOTAL NUMBER OF ITEMS SOLD =
09/14/20 10:17am 452 2 10 115

**κατ**ω 8**44** 

### Newton County Purchase Card Activity Log

C	OUNT	Y
8		GE
T.		OR OR
W	7821	*4

Department Information Systems	
ast 4 Digits of Card 7439	

\*Must be completed if charge is for a meal.

Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
8/19/2020	Holodyn Corp	Domain Renewal	\$14.99	52.2250	
8/31/2020	Post & Parcel	Parts Return Amazon	\$19.08	52.3230	
08/31/2020	Holodyn Corp	Brochure Packages for Websites Sept	\$60.00	52.2250	
09/02/2020	Google	Google Cloud – Gsuite Voice	\$13.24	53.1100	

Statement Total:

\$107.31

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Cardholder Signature

Approval Signature (Department Head, Elected Official, or County Manager)

### **YNOVUS<sup>®</sup>**

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

### SERVICES

**CARD SERVICES** P.O. BOX 2181 COLUMBUS GA 31902-2181 Account NumberXXXX-XXXX-XXXX-7439 Payment Due N/A New Balance N/A Minimum Payment N/A

**TIM SINGLEY NEWTON COUNTY BOC STE 204** 1113 USHER ST NW **COVINGTON GA 30014-2471**  \*\* 0000000

760038067439

000000000

**Customer Inquiries Address:** 

00000000

Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

### Visa Account Summary

Account Number XXXX-XXXX-XXXX-7439 Statement Closing Date September 15, 2020 Credit Line \$5,000.00 Available Credit N/A Minimum Payment N/A Payment Due Date N/A

### Balance Summary

Previous Balance N/A Credits \$0.00 Purchases and Debits \$107.31 Cash Advances \$0.00 **FINANCE CHARGE** N/A New Balance N/A

### Important Contact Information

(See reverse side for billing and other important information)

Card Services Payment Address:

P.O. Box 2181

Columbus, GA 31902-2181

www.commercialcardview.com

Pay Online: TTY Telephone: 1-877-254-3568

Commercial Customer Support

P.O. Box 23061

Columbus, GA 31902-3061

Customer Service: 1-888-SYNOVUS (796-6887)

### Transaction Detail

Trans Date		Description	Purchase Order No.	Amount
08/19	00/01	HOLODYN CORPORATION 678-7999855 GA	127898	\$14.99
06/19	06/21	**************************************	127090	\$14.99
08/31	09/01	POST & PARCEL COVINGTON GA	30014	\$19.08
		******* MEMO ITEM *********		
08/31	09/02	HOLODYN CORPORATION 678-7999855 GA	127956	\$60.00
		****** MEMO ITEM *********		
09/02	09/03	GOOGLE *SVCSCO.NEWTON. G.CO/HELPPAY# CA	P0vgRKLt	\$13.24
		******* MFMO ITEM *********	•	





Dear Tim Singley (Newton County Board of Commissioners),

This is a payment receipt for Invoice 127956 sent on 08/31/2020

Brochure Hosting - alcovycircuit.com (09/15/2020 - 10/14/2020) \$30.00 USD Addon (alcovycircuit.com) - Dedicated IP (09/15/2020 - 10/14/2020) \$3.00 USD Parked Domain Hosting - co.newton.ga.us (09/15/2020 - 10/14/2020) \$5.00 USD Addon (co.newton.ga.us) - Dedicated IP (09/15/2020 - 10/14/2020) \$3.00 USD Parked Domain Hosting - newtonrecreation.com (09/15/2020 - 10/14/2020) \$5.00 USD Addon (newtonrecreation.com) - Dedicated IP (09/15/2020 - 10/14/2020) \$3.00 USD Parked Domain Hosting - sheriff.co.newton.ga.us (09/15/2020 - 10/14/2020) \$5.00 USD Addon (sheriff.co.newton.ga.us) - Dedicated IP (09/15/2020 - 10/14/2020) \$3.00 USD Addon (gaitherplantation.com) - Dedicated IP (09/15/2020 - 10/14/2020) \$3.00 USD

-----

Sub Total: \$60.00 USD Credit: \$0.00 USD Total: \$60.00 USD

Amount: \$60.00 USD Transaction #: 80971107 Total Paid: \$60.00 USD

Remaining Balance: \$0.00 USD

	surreturniere berei	The or the fell state of the same of the s	
Grov Tre		POST_PARCEL 5 HIGHWAY 278 NW TINGTON, GA 30014 14:46:10 CREDIT CARD	Note !
Pare Pare	Card # Chip Card: AID: SEQ #: Batch #: INVOICE Approval Code: Entry Method: Mode: Tax Amount:	VISA SALE  XXXXXXXXXXXXX7439  VISA CREDIT  A0000000031010  16  660  16  035003  Chip Read  Issuer  \$0.00	- F
7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Cust Code:  SALE AMOUNT	30014 \$19.08 TOMER COPY	12 1 H







Dear Tim Singley (Newton County Board of Commissioners),

This is a payment receipt for Invoice 127898 sent on 08/19/2020

Domain Renewal - keepnewtonbeautiful.org - 1 Year/s (09/18/2020 - 09/17/2021) \$14.99 USD

Sub Total: \$14.99 USD Credit: \$0.00 USD Total: \$14.99 USD

Amount: \$14.99 USD Transaction #: 80922226 Total Paid: \$14.99 USD

Remaining Balance: \$0.00 USD

Status: Paid

https://mail.google.com/mail/u/0/?tab=rm#inbox/FMfcgxwJXpWgQZQnRzrFrvHZMkjztfdH?projector=1&messagePartId=0.2



Invoice number: 3775824625

### Google Voice Inc.

1600 Amphitheatre Parkway Mountain View, CA 94043 United States Federal Tax ID: 20-3699496

### Bill to

Greg Mann
UNINCORPORATED, GA 30014
United States

### Details

Invoice number	3775824625
Invoice date	Aug 31, 2020
Billing ID.	8020-2019-4660
Domain Name	co.newton.ga.us

### Google Cloud - Voice

Total in USD	\$13.24
Summary for Aug 1, 2020 - Aug 31, 2020	
Subtotal in USD	\$10.04
Federal Regulatory Assessment Fee	\$0.16
Federal Universal Service Fund	\$1.54
Local 911 Surcharge	\$1.50
Total in USD	\$13.24

You will be automatically charged for any amount due.



### Domain Name: co.newton.ga.us

Subscription	Description	Interval	Usage	Amount(\$)
Google G Suite Telecom Subscription	Google Voice Starter - License usage measured in license months	Aug 1 - Aug 31	1 Months	10.04
	Subtotal in USE	)		\$10.04
	Federal Regula	tory Assessment Fee		\$0.16
	Federal Univers	al Service Fund		\$1.54
	Local 911 Surch	harge		\$1.50
	Total in USD			\$13.24

To learn more about this invoice, please see <u>How Google Voice billing works</u>

### Newton County Purchase Card Activity Log

Cardholder Name Training & Travel	
Department Newton County Sheriff's Office	
Last 4 Digits of Card 9847	
Month Sen-20	



\*Must be completed if charge is for a meal

				A CONTRACTOR OF THE PROPERTY O	a meal.
Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
8/27/2020	Celebrite, Inc.	Recertification Fee for Investigator Clinton French	\$289.00	100-33100-523600	mear Attendees
9/3/2020	Callaway Gardens Resort- Pine Mountain, GA	Charge to be credited back, payment sent by check instead.	\$131.00	100-111910- Reimbursement	
9/4/2020	Resort- Pine Mountain, GA	Previous charge credited back	-\$131.00	100-111910- Reimbursement	
9/10/2020	Paypal- GeorgiaGang	GGIA member dues for Cpl. Colin Cunningham	\$25.00	100-33100-523600	
	*	*			

Statement Total:

\$314.00

I herby confirm that all purchases stated above follow all purchasing card policies and procedures.

Cardholder Signature

Approval Signature (Department Head, Elected Official, or County Manager)

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

Account NumberXXXX-XXXX-XXXX-9847

Payment Due

N/A

New Balance

N/A

Minimum Payment

N/A

TRAINING & TRAVEL NEWTON CO SHERIFF DEPT

\*\* 0000000

**STE 204** 1113 USHER ST NW **COVINGTON GA 30014-2471** 

CARD SERVICES

COLUMBUS GA 31902-2181

P.O. BOX 2181

762001319847

000000000

000000000

Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

### Visa Account Summary

Account Number XXXX-XXXX-XXXX-9847 Statement Closing Date September 15, 2020 \$6,000.00 Available Credit N/A Minimum Payment N/A Payment Due Date N/A

### Balance Summary

Previous Balance N/A Credits \$131.00 Purchases and Debits \$445.00 Cash Advances \$0.00 **FINANCE CHARGE** N/A New Balance N/A

### Important Contact Information

(See reverse side for billing and other important information)

Payment Address:

Pay Online:

TTY Telephone:

Credit Line

Card Services

1-877-254-3568

Customer Inquiries Address:

Commercial Customer Support

P.O. Box 2181

P.O. Box 23061 Columbus, GA 31902-3061

Columbus, GA 31902-2181

www.commercialcardview.com

**Customer Service:** 

1-888-SYNOVUS (796-6887)

### Transaction Detail

Trans Date	Post Date	Description	Purchase Order No.	Amount
08/27	08/31	CELLEBRITE INC. 201-8488552 NJ	31010709820	\$289.00
		******* MEMO ITEM *********		
09/03	09/04	CALLAWAY GARDENS RESORT PINE MOUNTAIN GA		\$131.00
		************* MEMO ITEM ************************************		
		117174430 ARRIVAL: 08-31-20		
09/04	09/07	CALLAWAY GARDENS RESORT PINE MOUNTAIN GA		\$131.00CR
		************* MEMO ITEM ************************************		
09/10	09/11	PAYPAL *GEORGIAGANG 402-935-7733 GA	48871251	\$25.00
		****** MEMO ITEM *********		

### **SYNOVUS**°



### Purchase Card Sign Out

Date Checked Out: 8-27-20	
Date Returned: 8-27-20 •	
_ Charles French	
Purchasing Department's purchase card and I will use	
I understand that any goods, supplies and services p	ourchased and obtained will follow the
Purchasing Policy and Procedures as adopted May 3	1, 2016. NO purchase can exceed
\$5,000.00 without a Purchase Order being issued an	d approved as outlined in the County's
policy and procedures.	
The purpose of using this card will be to purchase:	
Cellebrite recordification	
I agree to return the card back to Purchasing within th	
possible after I have made my purchase(s) along with	ALL detailed receipts.
Account Coding: 150 - 111910	(REQUIRED)
Signature: Inttall	Date: 8-27-20



### NEWTON COUNTY SHERIFF'S OFFICE

PURCHASE REQUISITION

15151 Alcovy-Jersey Rd., NE • Covington, Georgia 30014 Ph: (678) 625-1400 • Fax: (678) 625-1473

Requested By	PO Number (if applicable)
Clinton French	

	Clinton French	er land var til det på	
Payable To		Date	Date Needed By

Cellbrite 7 Campus Drive, Suite 210 Parsippany, NJ 07054

Date	Date Needed By
8/24/2020	

Description	Unit Price	Quantity	Line Total
Cellebrite certification ( has to be paid on-line)	\$ 289	1	\$ 289
	\$		\$ 0
	\$		\$ 0
	\$		\$ 0
	\$		\$ 0
	\$		\$ 0
	\$		\$ 0
	\$		\$ 0

### **Instructions:**

- Please attach quote(s), per Purchasing Policy, and any supporting documentation for review.
- · Forward to Dept. Head for initial approval.
- After Dept. Head signature, forward to Chief Carter for authorization.

Subtotal	289	
Sales Tax		
Shipping & Handling		
Total	289	

Department Head Signature:	Date: 8/25/2020
Authorized by:	 Date:

### RE: Re-cert

# Hope Laipply <Hope.Laipply@cellebrite.com>

Tue 2/4/2020 6:04 PN

To: Clinton French <cfrench@newtonsheriffga.org>;

### Hi Clinton,

refresher course. It is a 5-hour refresher course with no exam. The cost is \$289.00. I see that your certifications expire this year. Please use the link below to register and pay (if you would like) for the recertification

# https://www.cellebritelearningcenter.com/local/catalog/?reopen=5420

If you have any questions, please let me know and I will be happy to help.

Kind regards,

# Hope Laipply | Training Specialist / Training

Tel. +1-973-206-7765 | e: Hope.Laipply@cellebrite.com | www.cellebrite.com

Cellebrite | 7 Campus Dr, Suite 210, Parsippany, NJ 07054, USA | 800-942-3415

# CHECK OUT CELLEBRITE'S LARGEST TRAINING EVENT EVER! - Lowest pricing ever advertised!

[Cellebrite.com/en/engage]Cellebrite.com/en/engage



## College Credit Available

your training coordinator. University to allow students to earn college credit for CCO and CCPA training. View more details at http://explore.felician.edu/cellebrite/ or contact Did You know that your CCO/CCPA Certifications can be used towards a certificate or degree in Cyber Security. Cellebrite has partnered with Felician

From: Clinton French <cfrench@newtonsheriffga.org>

Sent: Tuesday, February 4, 2020 1:52 PM

To: Alexa Gonzalez <alexa.gonzalez@cellebrite.com>; Hope Laipply <Hope.Laipply@cellebrite.com>

Subject: Re: Re-cert

### Thank you!!!

From: Alexa Gonzalez < alexa.gonzalez@cellebrite.com >

**Sent:** Tuesday, February 4, 2020 1:47:27 PM

To: Clinton French; Hope Laipply

Subject: RE: Re-cert

HI Clinton -

with the recertification No problem at all, I will be able to point you in the right direction. I am CC'ing Hope onto this email and she will be able to assist you

<u>@Hope Laipply.</u> Can you please assist Clinton with the recertification process

Thank you!

Alexa Gonzalez | SLED, Regional Manager

Cellebrite Inc. | 7 Campus Drive, Suite 210, Parsippany, NJ 07054, USA Tel. 973-206-7673 | e. alexa.gonzalez@cellebrite.com | www.cellebrite.com





From: Clinton French < cfrench@newtonsheriffga.org >

Sent: Tuesday, February 4, 2020 1:03 PM

To: Alexa Gonzalez < alexa.gonzalez@cellebrite.com >

Subject: Re-cert

Good Morning.

emailing you to see if you can provide any guidance for me to re-certify. I took the CCO and CCA courses her in Athens, Ga in 2018. (Myself and Sgt. Kevin Freeman.) I'm sorry that I always email you, but you and John Mchenry are the only contacts that I have for Cellebrite. I'm

## Thank you in advance.

Click here to report this email as spam.

attachments. If you have received this e-mail in error please notify the sender immediately [by clicking 'Reply'] and delete this e-mail. recipient(s). If you are not the intended recipient you may not disclose, copy, distribute or retain any part of this message or This e-mail and the information it contains may be privileged and/or confidential. It is intended solely for the use of the named

This message has been scanned for malware by Websense. www.websense.com

notify the sender immediately [by clicking 'Reply'] and delete this e-mail. intended recipient you may not disclose, copy, distribute or retain any part of this message or attachments. If you have received this e-mail in error please This e-mail and the information it contains may be privileged and/or confidential. It is intended solely for the use of the named recipient(s). If you are not the

### Cellebrite, Inc.

7 Campus Drive Suite 210 Parsippany NJ 07054 **United States** Tel: +1 201 848 8552

Fax: +1 201 848 9982 Tax ID #: 22-3770059



Invoice

Sale #: CSUS5080 Date: 08/27/2020

Sales Order #SOUS61350

**Bill To** Clinton French 15151 ALCOVY RD **COVINGTON GA 30014-6405** 

**United States** 

Ship To Clinton French 15151 ALCOVY RD **COVINGTON GA 30014-6405 United States** 

Invoice Date	Currency
08/27/2020	USD

Quantity	Item	Amount
1	U-TRN-03-022 CCO+CCPA Combo Refresher Course	289.00

Subtotal \$289.00 Total \$289.00 **Amount Due** \$0.00

Terms and Conditions:

Complete Terms and conditions of sale available upon request (or available at: http://legal.cellebrite.com/us/index.html)

For additional information please contact: email: training@cellebrite.com phone: +1 201- 848-8552

### YOUR CONFIRMATION NUMBER IS 799-SOUS61350

You will receive two emails. One is a receipt for your records. The other will be your confirmation of enrollment.

IF YOU DO NOT RECEIVE THIS EMAIL PLEASE CHECK YOUR JUNK MAIL AND SPAM FOLDERS. PLEASE ALLOW EMAILS FROM "NO-REPLY@CELLEBRITE.COM"

### IMPORTANT NOTE ABOUT CANCELLATIONS

Instructor-led classes are subject to cancellation. If cancellation does occur, each participant will be notified at least two weeks prior to the start of the class. Cellebrite is NOT responsible for costs associated with the cancellation of classes such as flight and hotel accommodations for participants. In the event of a cancellation, the cost of the training class will be refunded to the participant or applied to another training program. Prior to booking travel for an instructor-led class, you may call Cellebrite Global Training Support +1-866-893-9531 to verify the status of the class.

Image

Item

Qty

**Brief Description** 

Rate Amount

U-TRN-03-022

CCO+CCPA Combo Refresher Course

\$289.00 \$289.00

Tax \$0.00

Total \$289.00

**Finish Shopping** 



### Purchase Card Sign Out

Date Checked Out: 9 10 2020	**
Date Checked Out:       9 10 2020         Date Returned:       9 10 2020	
92	
Tema Maxwell	am signing out Newton County
Purchasing Department's purchase card and I will use t	his card for only County use.
I understand that any goods, supplies and services pur	chased and obtained will follow the
Purchasing Policy and Procedures as adopted May 31,	2016. NO purchase can exceed
\$5,000.00 without a Purchase Order being issued and	approved as outlined in the County's
policy and procedures.	
The purpose of using this card will be to purchase:	
GGIA dues for Cpl. Cunnin	ngham:
I agree to return the card back to Purchasing within the	same day of checking out or as soon as
possible after I have made my purchase(s) along with AL	L detailed receipts.
Account Coding:	(REQUIRED)
Signature. Ilva Maxwell	Date: 9.10.20



### NEWTON COUNTY SHERIFF'S OFFICE

PURCHASE REQUISITION

15151 Alcovy-Jersey Rd., NE • Covington, Georgia 30014 Ph: (678) 625-1400 • Fax: (678) 625-1473

Requested By	PO Number (if applicable)
Cpl Colin Cunningham	

Payable To	
GGIA	

Date	Date Needed By
09/03/2020	

Description	Unit Price	Quantity	Line Total
GGIA member dues	\$ <sup>25</sup>	1	\$ <sup>25</sup>
paid 9/10/20	\$		\$ 0
paid 9/10/20 via travel p.card	\$		\$ 0
p.carei	\$		\$ 0
	\$		\$ 0
	\$	9	\$ 0
	\$		\$-0
	\$		\$ 0

### Instructions:

- Please attach quote(s), per Purchasing Policy, and any supporting documentation for review.
- · Forward to Dept. Head for initial approval.

After Dept. Head signature, forward to Chief Carter for authorization.

Subtotal	25
Sales Tax	
Shipping & Handling	
Total	25

900

Department Head Signature:	
Authorized by:	46

Date: 9-3-2020

Date: 9-3-2020

### Fwd: Renewal due today

### Colin Cunningham

Thu 9/3/2020 7:53 AM

To: Terria Maxwell <tmaxwell@newtonsheriffga.org>;

Corporal Colin Cunningham Newton County Sheriff's Office Criminal Investigations Division Office: 6786251474 Ccunningham@newtonsheriffga.org

Begin forwarded message:

From: Georgia Gang Investigators Association <GGIA@wildapricot.org>

Date: September 3, 2020 at 12:10:21 AM EDT

To: Colin Cunningham <ccunningham@newtonsheriffga.org>

Subject: Renewal due today

Reply-To: "Georgia Gang Investigators Association" <secretary@ggia.net>

Hello,

A friendly reminder that your membership is due for renewal as of today:

Georgia Gang Investigators Association https://ggia.wildapricot.org/

For: Colin Cunningham, Criminal Investigations

Renewal date: 03 Sep 2020

You can renew online by logging in with your email ccunningham@newtonsheriffga.org and password at https://ggia.wildapricot.org/

Thank you.

Enter search string

Q

### Georgia Gang Investigators Association

Intelligence, Suppression, Training, Prevention



Home > My profile > Invoice # 08222

Back

### **Invoice #08222**

Payment successful

### **Invoice details**

Balance due

\$0.00

**Amount** 

\$25.00

\$25.00 paid on 10 Sep 2020

Invoice #

08222

Date

05 Jul 2020

Origin

Member renewal

Regular Member

Invoiced to

Colin Cunningham, Criminal Investigations

ccunningham@newtonsheriffga.org

Item

**Amount** 

Membership renewal. Level: Regular Member. Renew to 03 Sep 2021

\$25.00

Item

**Amount** 

Invoice total

\$25.00

Georgia Gang Investigators Association

Email: mcrouth@chathamcounty.org

### Fwd: Membership renewal completed at Georgia Gang Investigators Association

### Colin Cunningham

Thu 9/10/2020 10:52 AM

To: Terria Maxwell < tmaxwell@newtonsheriffga.org >;

Corporal Colin Cunningham Newton County Sheriff's Office Criminal Investigations Division Office: 6786251474 Ccunningham@newtonsheriffga.org

Begin forwarded message:

From: Georgia Gang Investigators Association < GGIA@wildapricot.org>

Date: September 10, 2020 at 10:48:58 AM EDT

To: Colin Cunningham <ccunningham@newtonsheriffga.org>

Subject: Membership renewal completed at Georgia Gang Investigators Association

Reply-To: "Georgia Gang Investigators Association" <secretary@ggia.net>

Dear Colin Cunningham, Your membership renewal at Georgia Gang Investigators Association to 03 Sep 2021 has been completed successfully!

### YOUR MEMBERSHIP DETAILS:

Name: Colin Cunningham

Email: ccunningham@newtonsheriffga.org

Organization: Criminal Investigations

Membership status: Active

Membership level: Regular Member (\$25.00 (USD))

Member since: 04 Nov 2019 Next renewal date: 03 Sep 2021

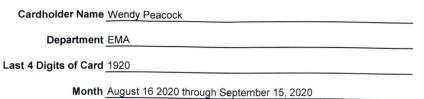
You can log in at <u>Georgia Gang Investigators Association</u> using your email ccunningham@newtonsheriffga.org and password.

Best regards,

<u>Georgia Gang Investigators Association</u>

If you no longer wish to receive these emails you can <u>unsubscribe</u> at any time.

### **Newton County Purchase Card Activity Log**





\*Must be completed if charge is for

					a meal.
Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
8/26/2020	Mayfield Ace Hardware	Ant & Wasp Spray	\$4.27	10039200-531100	
8/26/2020	Active911 Subscription	911 Notification Subscription	\$14.00	10039200-523600	
9/2/2020	Rudyboo's	Food for NCSO Cleanout Crew	\$42.78	10039200531300	
9/20/2020	Checkers	Food for NCSO Cleanout Crew	\$8.54	10039200-531300	

Statement Total:

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Approval Signature (Department Head, Elected Official, or County Manager)

### **NOVUS**°

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

Account NumberXXXX-XXXX-XXXX-1920

Payment Due

N/A

New Balance

N/A

Minimum Payment

N/A

WENDY PEACOCK **NEWTON COUNTY BOC STE 204** 1113 USHER ST NW **COVINGTON GA 30014-2471** 

**CARD SERVICES** 

P.O. BOX 2181

COLUMBUS GA 31902-2181

\*\* 0000000

762003101920

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Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

### Visa Account Summary

### Account Number XXXX-XXXX-XXXX-1920 Statement Closing Date September 15, 2020 Credit Line \$5,000.00 Available Credit N/A Minimum Payment N/A Payment Due Date N/A

### Balance Summary

Previous Balance	N/A
Credits	\$0.00
Purchases and Debits	\$69.59
Cash Advances	\$0.00
FINANCE CHARGE	N/A
New Balance	N/A

### Important Contact Information

(See reverse side for billing and other important information)

Payment Address:

Card Services

P.O. Box 2181

Columbus, GA 31902-2181

Pay Online: TTY Telephone: www.commercialcardview.com

Customer Inquiries Address:

Commercial Customer Support

P.O. Box 23061

Columbus, GA 31902-3061

1-877-254-3568

Customer Service:

1-888-SYNOVUS (796-6887)

### Transaction Detail

Trans Date	_	Description	Purchase Order No.	Amount
08/26	08/27	MAYFIELD ACE HARDWARE COVINGTON GA	00850656	\$4.27
08/26	08/28	ACTIVE911 INC 541-223-7992 OR	42196009038	\$14.00
09/02	09/03	RUDYBOO'S BUFFALO CAFE COVINGTON GA		\$42.78
09/02	09/04	CHECKERS C310 COVINGTON GA		\$8.54

THANK YOU FOR SHOPPING AT MAYFIELD ACE HARDWARE 2171 ELM STREET NE P. O. BOX 1467 COVINGTON, GA. 30014 (770) 786-2550

Receipt required for all returns.Weather Virus related & closeout not returnable 08/26/20 1:15PM HM 583 SALE

7415136	1	EA	\$3.99	EA S
WASP & HORNET K	ILLR2	OOZ	,	\$3.99
Regular Price:			4.49	
You Saved :			.50	
Return Value :	1.5	995		
7415128	1	EA	.00	EA S
ANT&ROACH KLLR1	7.50Z		\$N/	C/C
Regular Price:			4.79	
You Saved :			4.79	
Return Value :	1.	995		
Insect Killer B	0G0			
OUD TOTAL A	2.0	O T/	v. c	20

SUB-TOTAL:\$	3.99	TAX:	\$ .28
	1	TOTAL:	\$ 4.27
	BC AMT		\$ 4.27

BK CARD#: XXXXXXXXXXXX1920 MID:\*\*\*\*\*\*\*\*8881 TID:\*\*\*7155 AUTH: 046664 AMT: \$ 4.27 Host reference #:850656 Bat#

Authorizing Network: VISA

Chip Read

CARD TYPE:VISA

AID : A0000000031010 TVR : 8080008000 IAD : 06010A03608400

TSI : 6800 ARC : 00 MODE : Issuer

CVM :

Name : VISA CREDIT

ATC :0004

AC : 86C3D807127C1639 TxnID/ValCode: 369479

Bank card

USD\$ 4.27

EXPR: XXXX



==>> JRNL#I50656/2 CUST NO:\*12918 <<==

THANK YOU WENDY PEACOCK FOR YOUR PATRONAGE ACE REWARDS ID # 1928256345



Active911, Inc. 4100 SW Research Way Suite B Corvallis, OR 97333

### Receipt

Invoice #

201469

PO#

Billed On

Wed, 26 Aug 2020

Terms

On-Receipt

### **Billed To**

Attn: Wendy Peacock (user ID 259745)

PAID	on Wed, 26 Aug 2020
	14.00 USD

Description	Quantity	Subtotal
Traditional subscription for an individual device	1	14.00
	Subtotal	14.00
	Taxes	0.00
	Total Paid	14.00

### **Payments**

Wed, 26 Aug 2020	14.00 Payment from Card
	A CONTRACTOR OF THE CONTRACTOR

### **Notes**

- All Amounts are in United States Dollars (USD)
- · You have indicated your acceptance of the Terms of Service, located at http://active911.com/terms\_of\_service
   Your purchase will be completed once payment is remitted

541.223.7992 www.active911.com contact@active911.com Stors# 5316 (678) 712-634 3194 US Hwy 278 NW Covington, GA 30014 (678) 342-2102

### DS222

09/02/2020 11: 3 AMA 20023 7.98 4.98 7.98 6.56 Host: LISA DS222 Area: Driver's Side MD#Comb Big Buford cmb Fries - Med (in Cmb) Mr. Pibb - Med (i) ( Subtotal Tax B. 544 N. SEE REVERSE FOR DETAILS. P. 1919. I. 1 Order Total VISA #XXXXXXXXXXXXX1920 Auth: 008458 Tell us how we are doing and receive a FREE sandwich with purchase of large drink www.guestobsessed.com (678)712-6040 --- Check Closed ---

RudyBoo's Buffalo Cafe 2123 PACE STREET COVINGTON , GA 30014 770-787-0421

### SALE

Server #: 0000 MID: 8885 TID: 00B82964 Batch #: 371 09/02/20 APPR CODE: VISA **************1920	REF#: 0000000 RRN: 24650624096 11:22:4 029255 Ch	4 45 iip ***
TIP	\$	_
TOTAL	\$APPROVED	
VISA CREDIT AID: A000000 TVR: 80 80 TSI: 68 00	00031010	

Thank You Please Come Again CUSTOMER COPY

### Newton County Purchase Card Activity Log

(c)	OUNT	FF
8	-	OE CE
3	600	Pa
WA.	1821	*4

Cardholder Name	Jody Nolan	
Department	EMA	
ast 4 Digits of Card	9321	

Month August 16 2020 through September 15, 2020

\*Must be completed if charge is for a meal.

			a meai.		
Date	Vendor	Description and Business Purpose of Expenditure	Total	Account Coding	*Meal Attendees
8/19/2020	Home Depot	CREDIT for Item that was never delivered	\$0.00	CREDIT of \$99.00	
9/2/2020	Walmart	EOC Supplies	\$742.58	10039200-521600	
9/2/2020	Walmart	EOC Supplies	\$233.26	10039200-521600	
	JL				

Statement Total:

\$975.84

I herby confirm that all purchases stated above follow all purchasing card policies and procedures

Sardholder Signature

lovd Kerr (Nov 10, 2020 09:36 EST)

Approval Signature (Department Head, Elected Official, or County Manager)

SYNOVUS BANK P.O. BOX 23061 COLUMBUS GA 31902-3061

### SERVICES

**CARD SERVICES** P.O. BOX 2181 COLUMBUS GA 31902-2181 Account Number XXXX-XXXX-XXXX-9321 Payment Due N/A New Balance N/A Minimum Payment N/A

JODY NOLAN **NEWTON COUNTY BOC STE 204** 1113 USHER ST NW **COVINGTON GA 30014-2471**  \*\* 0000000

760038039321

000000000

000000000

Please Detach and Return With Your Payment

For customer service, call 1-888-SYNOVUS (796-6887) 24 hours a day, 7 days a week.

### Visa Account Summary

XXXX-XXXX-XXXX-9321 Account Number September 15, 2020 Statement Closing Date \$5,000.00 Credit Line Available Credit Minimum Payment Payment Due Date

### Balance Summary Previous Balance

N/A \$99.00 Credits \$975.84 Purchases and Debits Cash Advances \$0.00 N/A **FINANCE CHARGE** New Balance N/A

### Important Contact Information

(See reverse side for billing and other important information)

Payment Address:

Pay Online:

Card Services P.O. Box 2181

Columbus, GA 31902-2181

www.commercialcardview.com

N/A

N/A

N/A

Commercial Customer Support

P.O. Box 23061

Columbus, GA 31902-3061

1-888-SYNOVUS (796-6887) Customer Service: 1-877-254-3568 TTY Telephone:

Customer Inquiries Address:

### Transaction Detail

Trans Date		Description	Purchase Order No.	Amount
08/19	08/21	THE HOME DEPOT 118 DECATUR GA	COVID 19 LOGISTIC	\$99.00CR
09/02	09/03	WALMART.COM AS 800-966-6546 AR	72065194	\$742.58
09/03	09/04	WALMART.COM AS 800-966-6546 AR ************************************	72065194	\$233.26



TCL 43" Class 4K UHD LED Roku Smart TV 4 Series 43S421

\$218.00\$218.00

Write a review

Current Quantity: 0 .Reorder

Return

Delivered Wed, Sep 9(Package 3 of 3)

Return or replacement eligible until Sat, Oct 10

DeliveredTrack package



SAMSUNG 65" Class 4K UHD 2160p LED Smart TV with HDR UN65NU6900

\$498.00\$498.00

Write a review

Current Quantity: 0 .Reorder

Return

Hide details

### Order summary

Subtotal (3 items)

Shipping

Tax

Tax information

\$912.00

Free

\$63.84

\$975.84

Total

Order #5152019-635983

- Payment method
- Visa ending in 9321

### Billing address

Jody Nolan Newton County BOC 8146 Carlton Trail Covington, GA 30014

### Delivery address

Wendy Peacock

8146 Carlton Trail

Covington, GA 30014

### Jody September Not Signed

Final Audit Report 2020-11-10

Created: 2020-11-09

By: Brittany White (blwhite@co.newton.ga.us)

Status: Signed

Transaction ID: CBJCHBCAABAAzzDqs6qW9pS7wsBxDwjViooypWPgwEnR

### "Jody September Not Signed" History

Document created by Brittany White (blwhite@co.newton.ga.us) 2020-11-09 - 8:38:46 PM GMT- IP address: 12.163.216.154

Document emailed to Lloyd Kerr (lkerr@co.newton.ga.us) for signature 2020-11-09 - 8:39:04 PM GMT

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Document e-signed by Lloyd Kerr (lkerr@co.newton.ga.us)

Signature Date: 2020-11-10 - 2:36:01 PM GMT - Time Source: server- IP address: 12.163.216.154

Agreement completed. 2020-11-10 - 2:36:01 PM GMT