

PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll)
Sara Phelan

For Statement Date: 07/17/2015

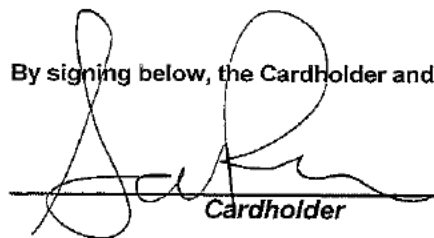
Purchasing Card Number (last 4 digits only):

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased. For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory Number for items is \$5,000 or less
7/10	Lexington Metals	Challenge Coin Reorder - CIB				3,8000	
	Charge to 455P321						

CARD TOTAL \$3800.00 JR Done - ja

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.


Cardholder

8/7/15
Date


Supervisor

8/12/15
Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

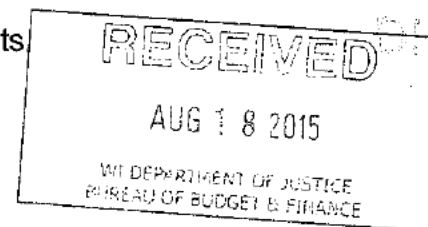

Div/Bureau P-Card Coordinator

8/18/15
Date

Upon receipt of your US Bank statement, the purchasing card log must be completed for that statement period.

Cardholder is responsible to obtain a receipt for all purchases and credits.

Instructions to complete Purchasing Card Log



08/25/15
WJ



U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

ST OF WI - DOJ

Invoice

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 07-17-15
TOTAL ACTIVITY \$ 3,800.00

	Invoice #
015	02862

000001079 1 AV 0.391 106481121593071 P

SARA PHELAN
TAX [REDACTED]
DEPT OF JUSTICE CID
17 W MAIN ST
MADISON WI 53703-3960

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT

RECEIVED

JUL 27 2015

WISCONSIN DEPT OF JUSTICE
TRAINING & STANDARDS BUREAU

Cardholder Signature _____
Approver Signature _____ Date _____

of Justice

F.O.B.

Lithia, FL

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
07-13	07-10	LEXINGTONME 800-282-8419 FL PUR ID: 5EB222VLJF2CQ TAX: 0.00	24492155191894976341935	5999	3,800.00

Price Each	Amount
4.75	3,800.00
0.00	0.00
0.00%	0.00

Default Accounting Code: 455TS TS028

CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER [REDACTED]		ACCOUNT SUMMARY	
	STATEMENT DATE	DISPUTED AMOUNT		
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 8335 FARGO, ND 58125-6335	07-17-15	\$.00	PREVIOUS BALANCE	\$.00
			PURCHASES & OTHER CHARGES	\$3,800.00
			CASH ADVANCES	\$.00
			CASH ADVANCE FEE	\$.00
			CREDITS	\$.00
		AMOUNT DUE \$ 0.00 DO NOT REMIT	TOTAL ACTIVITY	\$3,800.00

\$3,800.00

**LEXINGTON METAL PRODUCTS
CORPORATION**

PO Box 522
Lithia, FL 33547-0522
800-282-8419
e-mail: lexingtonmetal@tampabay.rr.com
web: www.militarybrasscoins.com

Invoice

Date	Invoice #
6/29/2015	02862

Bill To

Wisconsin Department of Justice
17 W. Main Street
PO Box 2718
Madison WI 53701-2718

Ship To

Wisconsin Department of Justice
17 W. Main Street
PO Box 2718
Madison WI 53701-2718

**PAID
07/10/2015**

P.O. Number	Terms	Rep	Ship	Via	F.O.B.
Sara Phelan	Due on receipt	PJR	8/10/2015	US Mail	Lithia, FL

Quantity	Item Code	Description	Price Each	Amount
800	LMC-175	Custom 1.75 Inch Diameter Stamped Brass Coin "Crime Information Bureau" plated in gold with two sided color and one-sided sandblast texturing and 3D Wisconsin State Seal (sandblast and two-sided color are included at no charge)	4.75	3,800.00
4	Free Shipping	Free Shipping and Insurance Out-of-state sale, exempt from sales tax	0.00 0.00%	0.00 0.00



Free shipping has been applied for pre-payment of this invoice. This saved you 72.00

Total \$3,800.00

Put it on a coin!

COPY

PURCHASING CARD LOG

RECEIVED

JUL 30 2015

WI DEPARTMENT OF JUSTICE
BUREAU OF BUDGET & FINANCE

Cardholder (Employee) Name (as shown on payroll)
Donna G Hahn

For Statement Date: 7-03-15

Purchasing Card Number (last 4 digits only):

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased. For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory Number for items is \$5,000 or less
06-20	Staples/ MI	Office supplies	511G 201			\$28.32	✓
06-19	5.11 Tactical/ Ca	Pistol Cases CIB Conf.	566P 321			\$1980.00	✓
06-19	4Imprint/ WI	Cleaning Cloths	555P 232			\$323.68	✓
06-23	Eder Flag/ WI	Flag poles, stands, etc.	511G 201			\$340.00	✓
06-23	Eder Flag/ WI	Flag poles, stands etc.	511G 201			\$79.86	✓
06-22	Apple Store/ Madison WI	Iphone screen fix Sara Phelan--- Per Brian O'Keefe	555P 232			\$109.00	✓
06-22	Apple Store/ Madison WI	Iphone case per Brian O'Keefe	555P 232			\$89.95	✓
06-24	Eder Flag/ WI	Flag pole	511G 201			\$46.88	✓
06-23	PC Name Tag/ WI	Printer ribbon	553P 321			\$276.63	✓
06-30	WW Grainger/ PA	Conveyor belt—Drug Take Back program	838F 241 8838			\$1368.06	✓
07-01	Staples/ MI	Office supplies Drug Take Back				\$492.27	✓
07-02	Staples/ MI	Supplies Drug Take Back				\$40.19	✓
07-02	Staples/ MI	Supplies Drug Take Back				\$17.23	✓

CARD TOTAL \$5,192.07

JR Done - ja

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

Donna G Hahn
Cardholder

7-14-15
Date

Supervisor

7-16-15
Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

Div/Bureau P-Card Coordinator

7/30/15
Date

08/04/15
mjf

5.11 TACTICAL
4300 SPYRES WAY
MODESTO, CA 95356

5.11, Inc.
62789 Collection Center Drive
Chicago, IL 60693-0627

ORDER STATUS

06/19/2015 12:07:25
MID: XXXXXXXXXX526 TID: [REDACTED]

CREDIT CARD
VISA SALE

CARD # [REDACTED]
INVOICE 0002
SEQ #: 0002
Batch #: 000537
Approval Code: 097867
Entry Method: Manual
Mode: Online
Tax Amount: \$0.00
Cust Code: 937
Avs Code: YYY

SALE AMOUNT \$1980.00

I agree to pay above total amount
according to card issuer agreement.
(Merchant agreement if Credit Voucher)

X

MERCHANT COPY

DE ACCT
ES

S
H
I
P
T
O

WI DEPT OF JUSTICE
ATTN: SARA PHILAN
17 W MAIN STREET
MADISON WI 53703
UNITED STATES

11	77001	1
CO	SOLD TO	SHIP TO
11	4-0	P10
QTY	PRTY	SEASON

PAGE 1

/08/15	BRAD SCHIMEL	NET 30	89 ASSOCIATIO
TRY DATE	CUSTOMER ORDER NO	DEPT	% TERMS
NO. SOLD BY	% T	NO. ACCOUNT SALESREP	
CR	A	O	O
NO DISCOUNT	CBS RES 40682	CONTRACT	

STATUS CODES
O-BACK ORDERED
W-FUTURE DEL DATE LISTED
A-AVAIL TO SHIP NOW
P-PROCESSING SHIPMENT
S-SHIPPED
C-CANCELLED
D-DELETED

	COLOR DESCRIPTION	DIM	SC	SIZE	QTY	PRICE	AMOUNT	C O D E	DELIVERY PERIOD	LOCATION
									DATE	INVOICE
PISTOL CASE	019 BLACK		O	1 9Z	66	15.00	990.00	O	80115	
PISTOL CASE	328 SANDSTONE		O	1 9Z	66	15.00	990.00	O	80115	

192	1980.00									
QTY	DOLLARS	QTY	DOLLARS	QTY	DOLLARS	QTY	DOLLARS	QTY	DOLLARS	
LAST DATE	NO TIMES	LAST DATE	NO TIMES	LAST DATE	NO TIMES	LAST DATE	NO TIMES	LAST DATE	NO TIMES	
ORDERED	ALLOCATED (W.I.P. AND F.G)	PICK TICKET/PACK & HOLD	SHIPPED CREDIT MEMO	CANCELLED/DELETED						

Order Confirmation 10626543

101 Commerce Street
Oshkosh, WI 54901

Toll Free 877-4imprint
Fax 800-355-5043

<http://www.4imprint.com>

Main address	Invoice address	Shipping address
Sara Phelan Wisconsin Dept of Justice 17 W MAIN ST MADISON, WI 53703-3960 Fax: _____	donna g hahn Wisconsin Dept of Justice 17 W MAIN ST MADISON WI 53703-3960	Sara Phelan Wisconsin Dept of Justice 17 W Main Street Madison, WI 53703 USA

Order No.	Order Date	Account Rep.	Account no.	Administrator	Cust. Ref.
10626543	06/04/2015	Barb Kramer	2509393	Barb Kramer	0

Product	Description	Qty	Color	Cost/Unit	Total
419439	Multi Purpose Cleaning Cloth - 6" x 6"	500	Royal Blue, Royal Blue	59¢	\$295.00
	Set-Up Charge	1		\$55.00	\$55.00
	Coupon Code	1		\$-35.00	\$-35.00

Artwork Instructions:

Questions call: Barb Kramer Phone: 877-446-7746 Ext. 8479
Email: bkramer@4imprint.com Direct Fax: 1-888-285-1864

Tax: 0¢
Freight Charge: \$8.68
Product Total: \$323.68

Order Total: \$323.68

Ship to	Item#	Qty	Ship by	Carrier, service	Due Date	Freight
Address above	117820	500	06/12/2015	Ground	06/19/2015	\$8.68

THIS IS YOUR SALES ORDER ACKNOWLEDGEMENT. Our Sales Invoice will be forwarded shortly after despatch. Important notice: In most cases the prices shown are actual and final. However, due to the complexities of your artwork or the customization involved with the product, additional charges may apply, or some of the additional charges shown may not be chargeable. If any changes are required, we will contact you by e-mail prior to production, and you will have the option to cancel your order without penalty. In any case, where additional charges apply, your signed approval will be required to proceed.

We will be sending information about your order to you via e-mail. To avoid any delays, we ask that you check your e-mail during the time your order is in process for any updates.

[Print page](#)

[Close Window](#)

PURCHASING CARD LOG



U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

ST OF WI - DOJ

es Order

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 07-31-15
TOTAL ACTIVITY \$ 2,306.25

S.O. Number
2006-14905

000001129 1 AV 0.391 106481135188789 P
MICHELLE M SANDRY
TAX [REDACTED]
WI DEPT OF JUSTICE TS
17 W MAIN ST
MADISON WI 53703-3960

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT

RECEIVED

AUG 05 2015

WISCONSIN DEPT OF JUSTICE
TRAINING & STANDARDS BUREAU

Cardholder Signature _____ Date _____
Approver Signature _____ Date _____

Terms

100% down

Amount

2,231.25
75.00

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
07-24	07-24	SUNSET HILL STONEWARE 920-886-1727 WI PUR ID: 00000000000000000000 TAX: 0.00	24692165205000126934394	5719	2,306.25

Default Accounting Code: 455TS TS009

CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER [REDACTED]		ACCOUNT SUMMARY	
	STATEMENT DATE	DISPUTED AMOUNT	PREVIOUS BALANCE	\$.00
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	07-31-15	\$.00	PURCHASES & OTHER CHARGES	\$2,306.25
	AMOUNT DUE \$ 0.00 DO NOT REMIT		CASH ADVANCES	\$.00
			CASH ADVANCE FEE	\$.00
			CREDITS	\$.00
			TOTAL ACTIVITY	\$2,306.25

\$2,306.25

\$0.00

\$2,306.25

ok to pay
M. Sandry

at 10:20
M. Sanchez

Payment Receipt

Sunset Hill Stoneware, LLC.

Neenah, WI 54956

1-800-509-4662

Fax: 920-882-8726

Received From:

WI DOJ Training and Standards

WI DOJ Training and Standards

Attn: Shelly Sandry

17 W Main St

Madison, WI 53703

Date Received 07/23/2015

Payment Amount \$2,306.25

Payment Method EFT

Check/Ref. No. 

BUSINESS EVENT AUTHORIZATION

(This form must be completed for every business event which will have costs paid by DOJ.)

Name and Purpose of Event: 2015 WI Jail Administrators ConferenceDates/Times: October 14-16, 2015City: Stevens Point, WISponsoring Division/Bureau: DLES, T&SCoordinator: Shelly SandryEstimated # of Attendees: State Employees (* See below): 4 DOJ 6 DOCNon-State Employees: 140

1. Justification for site selection: This must be provided if the location of the event will not a state government or university facility when more than 50% of attendees will be state employees.

Simplified bid process

2. Justification for Food Costs: Meals and break items, including service fees, must always be at state rates. Justification must be provided if these costs will exceed state maximums. Additionally, if more than 50% of attendees will be state employees headquartered in the business event city, justification must be provided for any food costs.

State rates

3. Giveaways: If items are to be purchased by DOJ and given to event attendees provide a description of the item, the dollar value of the item, the anticipated total cost, and the name of the vendor from whom the items will be purchased.

Stoneware mug similar to what the WI Chiefs and Deputy Sheriffs have handed out.
Approximately \$12.75 per piece.

*Conference is paid for by vendor fees and participant registration fees.

APPROVALS:

Shelly Sandry
Signature - Event Coordinator

7-17-15
Date

Star [Signature]
Signature - Supervisor

7-20-15
Date

* If more than 50% of attendees will be state employees and costs will be incurred, approval of the Administrator, Division of Management Services, must be given prior to the business event.

Signature - Administrator, DMS

Date

PURCHASING CARD LOG

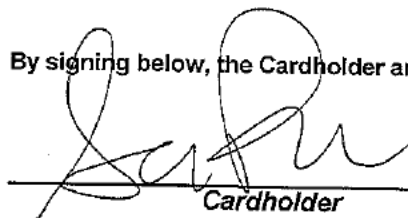
Cardholder (Employee) Name (as shown on payroll) Sara Phelan	For Statement Date: 07/31/2015
Purchasing Card Number (last 4 digits only): [REDACTED]	

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased. For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory Number for items is \$5,000 or less
7/22	4Imprint	T&S Vendor Booth giveaways	Multiple Conferences year round			799.72	
7/24	Agent Fee					6.00	
7/24	Delta Airlines	CIB Conference presenter				284.32	JR Done - ja
	Charge to 455P321	↳ Sandra Lynn Ramsey					


CARD TOTAL \$1,090.04 ✓

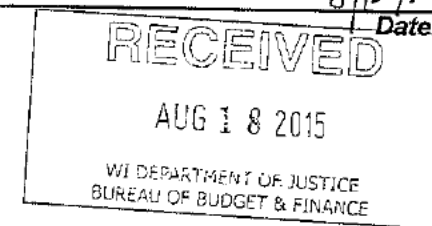
By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.


Cardholder
8/7/15
Date


Supervisor
8/12/15
Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.


Div/Bureau P-Card Coordinator
8/18/15
Date



Upon receipt of your US Bank statement, the purchasing card log must be completed for that statement period.

Cardholder is responsible to obtain a receipt for all purchases and credits.

08/26/15
ms



U.S. BANCORP SERVICE CENTER
P.O. Box 6343
Fargo, ND 58125-6343

ST OF WI - DOJ

ACCOUNT NUMBER

STATEMENT DATE 07-31-15

TOTAL ACTIVITY \$ 1,090.04

101 Commerce St
PO Box 320
Oshkosh, WI 54901

www.4imprint.com

|| Free 877-446-7746
|| Fax 800-355-5043

000001132 1 AV 0.391 106481135188792 P

SARA PHELAN
TAX
DEPT OF JUSTICE CIB
17 W MAIN ST
MADISON WI 53703-3960

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT

RECEIVED

AUG 05 2015

WISCONSIN DEPT OF JUSTICE
TRAINING & STANDARDS BUREAU

Cardholder

Signature _____ Date _____

Approver

Signature _____ Date _____

W

ce \$	Total \$
22.50	622.50
20.00	20.00
30.00	60.00
70.25	-70.25
37.47	167.47
	799.72

|| Net 799.72
|| Tax 0.00
|| Total 799.72
|| ived 799.72
|| Due 0.00

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
07-23	07-22	4IMPRINT 877-4467746 WI PUR ID: 10563716 TAX: 0.00	24906415203017588202618	5969	799.72
07-27	07-24	AGENT FEE 8900850092255 CORPORATE TRA WA 24717055206872062454089 RAMEY/SANDRA LY DEPARTURE: 07-24-15 XAA XD X XAO		4511	6.00
07-27	07-24	DELTA AIR 0067665881380 SEATTLE WA RAMEY/SANDRA LY DEPARTURE: 09-15-15 DSM DL V MSP DL V MSN DL V MSP DL V DSM	24717055206872062698792	3058	284.32

Default Accounting Code: 455TS TS028

CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER 		ACCOUNT SUMMARY	
	STATEMENT DATE	DISPUTED AMOUNT	PREVIOUS BALANCE	\$.00
	07-31-15	\$.00	PURCHASES & OTHER CHARGES	\$1,090.04
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 8335 FARGO, ND 58125-6335	AMOUNT DUE		CASH ADVANCES	\$.00
	\$ 0.00		CASH ADVANCE FEE	\$.00
	DO NOT REMIT		CREDITS	\$.00
			TOTAL ACTIVITY	\$1,090.04

|| ntage allowed by your state
|| reasonable attorney's fees
|| is or use tax. No credit will
|| er's goods. It may contain
|| conditions its acceptance of
|| onstitutes acceptance of
|| ording to our State Law.



101 Commerce St
PO Box 320
Oshkosh, WI 54901

www.4imprint.com

Toll Free 877-446-7746

Free Fax 800-355-5043

SARA PHELAN
WISCONSIN DEPT OF JUSTICE
17 W MAIN ST
MADISON WI 53703-3960

Shipping Address

Sara Phelan
Wisconsin Dept of Justice
17 W Main Street
Madison, WI 53703
USA
Tel: 608-266-7955

Invoice Number 4018657

Account No. 2509393

Invoice Date July 22, 2015

Account Rep. Lori Mades

Your Order No.

Our Order No. 10563716

Item		Torino Spirit Tumbler w/Straw - 16 oz. - Closeout		Colours (Tumbler,Trim): See Below, See Below	
Qty	Item #	Description	Unit \$	Price \$	Total \$
249	114090-CL	Torino Spirit Tumbler w/Straw - 16 oz. - Closeout	2.5000	622.50	622.50
1	Misc. Charge	Change of Ink	20.0000	20.00	20.00
1	Set-Up Charge	Set-Up Charge	60.0000	60.00	60.00
1	Coupon	Coupon Code	-70.2500	-70.25	-70.25
		Freight		167.47	167.47
					799.72
Total Net					799.72
Total Tax					0.00
Grand Total					799.72
Payment via Visa					Received 799.72
					Total Due 0.00

Thank You! We appreciate your business.

Any overruns you may have received are yours with our compliments.

- To insure proper credit to your account, please quote "4018657/2509393" on your check or remittance.
- If you are not satisfied with your order, please call 1-800-300-0764. All claims must be made within 5 days of receipt.
- Any questions regarding your invoice? Please call 1-800-982-8979. Our terms are Net 30.
- Please make checks payable to 4imprint

4imprint Federal ID # [REDACTED], GSA Contract # [REDACTED] A Late Payment Charge based on maximum annual percentage allowed by your state law will be applied to this balance owed under this invoice when the invoice becomes past due. The purchaser agrees to pay all of the company's reasonable attorney's fees and any collection agency fees incurred in the collection of any amount owed hereunder and not paid when due. Purchaser agrees to pay any sales or use tax. No credit will be issued for returned merchandise without our consent. This invoice is a conditional acceptance by the seller of the buyer's offer to purchase seller's goods. It may contain terms which differ from or add to those contained in the buyer's purchase order, and to the extent that this is the case, the seller hereby expressly conditions its acceptance of the buyer's offer on the buyer's assent to the additional or different terms. The buyer's receipt and retention of the goods covered by this invoice constitutes acceptance of any such additional or different terms. The buyer and seller agree that any contract hereby entered into has been made and is to be construed according to our State Law. Please visit our website - www.4imprint.com

Please Remit to:
4imprint, Inc.
25303 Network Place
Chicago, IL 60673-1253



corporate travel management

CTM Government Division
Phone: 206-674-4335
Hrs. Mon-Sun 7a-7p
us.travelctm.com

ADD TO OUTLOOK


Friday, 24JUL 2015 02:16 PM EDT

Passengers: SANDRA LYNN RAMEY

Agency Reference Number: LAEWYP

STATE OF WISCONSIN
101 E. WILSON ST, 6TH FLOOR
MADISON WI 53703-3405

Review this itinerary for accuracy regarding flights/times/dates and personal information.
CTM must be notified within 24 hours regarding corrections.
Thank you for choosing CTM.
Agent: CTM Automation BR21

AIR	Tuesday, 15SEP 2015	
Delta Air Lines		
Operated By: ENDEAVOR AIR DBA DELTA CONNECTION		Flight Number: 3945
From: (DSM) Des Moines IA, USA		Class: V-Coach/Economy
To: (MSP) Minneapolis St PI MN, USA		Depart: 11:23 AM
Stops: Nonstop		Arrive: 12:27 PM
Seats: 17B		Duration: 1 hour(s) 4 minute(s)
Equipment: Canadair Regional Jet		Status: CONFIRMED
ARRIVES MSP TERMINAL 1 - LINDBERGH		Miles: 233 / 373 KM
Delta Air Lines Confirmation number is F655OE		
Check in on-line to obtain boarding pass: Delta		
Click here for Baggage policies and fees: Delta		
AIR	Tuesday, 15SEP 2015	
Delta Air Lines		
From: (MSP) Minneapolis St PI MN, USA		Flight Number: 2199
To: (MSN) Madison WI, USA		Class: V-Coach/Economy
Stops: Nonstop		Depart: 01:15 PM
Seats: 39C		Arrive: 02:12 PM
Equipment: Boeing 757 Jet		Duration: 0 hour(s) 57 minute(s)
DEPARTS MSP TERMINAL 1 - LINDBERGH		Status: CONFIRMED
Delta Air Lines Confirmation number is F655OE		Miles: 227 / 363 KM
Check in on-line to obtain boarding pass: Delta		
Click here for Baggage policies and fees: Delta		

Wednesday, 16SEP 2015

Delta Air Lines

From: (MSN) Madison WI, USA

To: (MSP) Minneapolis St Pl MN, USA

Stops: Nonstop

Seats: 26C

Equipment: McDonnell Douglas MD-88 Jet

ARRIVES MSP TERMINAL 1 - LINDBERGH

Delta Air Lines Confirmation number is F655OE

Check in on-line to obtain boarding pass: [Delta](#)

Click here for Baggage policies and fees: [Delta](#)

Flight Number: 0867

Depart: 05:10 PM

Arrive: 06:12 PM

Duration: 1 hour(s) 2 minute(s)

Status: CONFIRMED

Class: V-Coach/Economy

Miles: 227 / 363 KM



AIR

Wednesday, 16SEP 2015

Delta Air Lines

Operated By: ENDEAVOR AIR DBA DELTA
CONNECTION

From: (MSP) Minneapolis St Pl MN, USA

To: (DSM) Des Moines IA, USA

Stops: Nonstop

Seats: 17B

Equipment: Canadair Regional Jet

DEPARTS MSP TERMINAL 1 - LINDBERGH

Delta Air Lines Confirmation number is F655OE

Check in on-line to obtain boarding pass: [Delta](#)

Click here for Baggage policies and fees: [Delta](#)

Flight Number: 3886

Depart: 07:29 PM

Arrive: 08:40 PM

Duration: 1 hour(s) 11 minute(s)

Status: CONFIRMED

Class: V-Coach/Economy

Miles: 233 / 373 KM



FOR *EMERGENCY* AFTER HOURS SERVICE WITHIN THE US
OR CANADA CALL 800-358-1125 AND GIVE CALLING CODE
S-5CWG. AFTER HOURS FEES WILL APPLY.
DEPT/AGY-WISCONSIN DEPARTMENT OF JUSTICE

Ticket/Invoice Information

Ticket for: SANDRA LYNN RAMEY

Date issued: 7/24/2015 Invoice Nbr: 8015754

Ticket Nbr: DL7665881380 Electronic Tkt: Yes Amount: 284.32
Base: 222.44 US Tax: 16.68 USD XT Tax: 45.20 USD

Charged to: [REDACTED]

Service fee: SANDRA LYNN RAMEY

Date issued: 7/24/2015

Document Nbr: XD0650092255

Amount: 6.00

Charged to: [REDACTED]

Total Tickets: 284.32

Total Fees: 6.00

Total Amount: 290.32

Please check carry on requirements at www.tsa.gov.
Charges may apply for checked baggage. Contact carrier prior to travel.
For International Travel, please check the latest [State Department Advisories](#).

Terms & Conditions information.

Airport Parking

PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll) Lewis, Eva M.	For Statement Date: 08-14-2015
Purchasing Card Number (last 4 digits only): XXXXX XXXXX XXXXX [REDACTED]	

Receipts are attached in order of occurrence

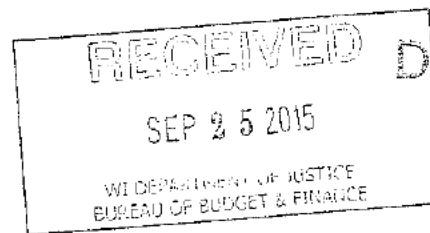
Transaction Date	Vendor Name/City	Items Purchased For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory Number for Items \$5,000 or Less
8/3/2015	Crestline	75 Torino café mugs for job fairs				291.36	✓
8/5/2015	Oriental Trading Co.	misc promo items for job fairs				247.56	✓
8/6/2015	Great Impressions	back-drop banner w/stand & artwork				952.00	✓
8/6/2015	4imprint	table runner for job fairs				159.57	✓
8/6/2015	Enterprise Rent-a-Car	rental car for DNA training				156.96	✓

RECEIVED
SEP 4 2015

CARD TOTAL

\$1,807.45 ✓

169257



DLES FISCAL

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

Eva Marie Lewis 09/02/2015
Cardholder Date

Centina Cesar 9/2/15
Supervisor Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

Kathy M. Hunkler 9-2-15
Div/Bureau P-Card Coordinator Date

ABW

9/25/15

10/06/15
WJ

CREST
CUSTOM PROMOTION

usbank.

U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

ST OF WI - DOJ

Account No.	876233
Order No.	1147848

ACCOUNT NUMBER	[REDACTED]
STATEMENT DATE	
TOTAL ACTIVITY	\$ 1,807.45

Bill To

STATE OF
EVA LEWIS
1578 S 11T
MILWAUKEE

000001988 1 AT 0.416 106481155396375 P
EVA M LEWIS
TAX EX [REDACTED] DNA
STATE CRIME LAB
1578 S 11TH ST
MILWAUKEE WI 53204-2860

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT

Item Number

109453 01A

Cardholder

Signature _____ Date _____

C109453 1AR

Approver

Signature _____ Date _____

S109453 1SC

NEW ACCOUNT ACTIVITY					
POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
08-06	08-05	CRESTLINE SPECIALTIES 800-285-0318 ME PUR ID: 1147848 TAX: 0.00	24493985218892011401787	5999	291.36
08-07	08-05	ORIENTAL TRADING CO 800-228-0475 NE PUR ID: 67278929301 TAX: 0.00	24041125218905300016700	5964	247.56
08-07	08-06	ENTERPRISE RENT-A-CAR MILWAUKEE WI D640555	24164075218018131153607	3405	156.96
08-07	08-06	4IMPRIINT 877-4467746 WI PUR ID: 10856525 TAX: 8.46	24906415218017969309563	5969	159.57
08-10	08-07	GREAT IMPRESSIONS MILWAUKEE WI	24327435219922503022994	2741	952.00

Invoice #287770

QUESTIONS? Call 1-
Please refer to your Account
in all communications regarding

Default Accounting Code: 455MILLAB DNA004

CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER [REDACTED]		ACCOUNT SUMMARY	
	STATEMENT DATE 08-14-15	DISPUTED AMOUNT \$.00	PREVIOUS BALANCE	\$.00
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	AMOUNT DUE \$ 0.00 DO NOT REMIT		PURCHASES & OTHER CHARGES	\$1,807.45
			CASH ADVANCES	\$.00
			CASH ADVANCE FEE	\$.00
			CREDITS	\$.00
		TOTAL ACTIVITY		\$1,807.45

VISA



Accounts past due 30 days
which is an annual percentage

Account No.	876233	PO No.		Due Date	08/05/15
Order No.	1147848	Order Date	08/03/15	Shipped Via.	UPS - Ground COMMERCIAL

Bill To

STATE OF WISCONSIN
EVA LEWIS
1578 S 11TH ST
MILWAUKEE WI 53204

Ship To

STATE OF WISCONSIN
EVA LEWIS
1578 S 11TH ST
MILWAUKEE WI 53204

Item Number	Item Description	Ship Date	Qty	Unit Price	Amount
109453 01A	TORINO CAFE MUG - 2 DAY SERVIC	08/04/15	75	3.080	231.00
C109453 1AR	FREE 1 COLOR IMPRINT	08/04/15	75		N/C
S109453 1SC	1 COLOR SETUP CHARGE	08/04/15	1	58.000	58.00

STATE OF WISCONSIN
DEPT OF JUSTICE
2015 AUG -6 A 8:35

Invoice #2877707

QUESTIONS? Call 1-800-221-7797

Please refer to your Account No. and our Invoice No. / Order No. in all communications regarding this invoice.

Subtotal	289.00
Sales Tax	0.00
Shipping and Handling	27.36
Coupon	-25.00
Total Invoice	291.36
Payment	-291.36
Balance Due	0.00

***NEW* Remit-To Address**

Please Remit Payment To:
Crestline Specialties, Inc.
PO Box 712144
Cincinnati, OH 45271-2144



Accounts past due 30 days and over are subject to a finance charge of 1 1/2% per month, which is an annual percentage rate of 18% to be applied to the unpaid balance.

Lewis, Eva M.

From: orders@oriental.com
Sent: Friday, July 31; 2015 4:51 PM
To: Lewis, Eva M.
Subject: Confirming your Orientaltrading.com order

oriental Trading
celebrating 30 years of fun



**LOWEST PRICE
GUARANTEE!**

[Shop](#)

[Your Account](#)

[Contact Us](#)



WE'RE ON IT!

Hi Eva,

Thank you for your order! You made our day and now we're working hard to make yours. Your fun stuff is on the way (cue happy dance), but for now, check out the goods:

The Basic Stuff:

Your
Customer 61366441
#:
Your 672789293
Order



#:

The Important Stuff:

Order 07/31/2015
Date:
Order In Process
Status:
Shipped ATTN: EVA LEWIS
To:

STATE OF WISCONSIN

Eva Lewis

1578 S 11th St

Milwaukee, WI

532042860

lewisem@doj.state.wi.us

Billed STATE OF WISCONSIN
To:

Eva Lewis

1578 S 11th St

Milwaukee, WI

532042860

The Fun Stuff:

You may also [view your order online here.](#)

Item#	Item Description	Quantity	Unit Price	Subtotal
47/342	Personalized Black Pencils (2 Dz)	5	\$7.99	\$39.95
13622887	(p) Ts Photo Mini Flying Disk-blue	5	\$17.99	\$89.95
12/4189	Blue Flying Disc (72 Pc)	5	\$0.00	\$0.00

13696488	Pz Stkr Photo Spirit Flying Disc	5	\$0.00	\$0.00
47/367	Personalized Blue Pencils (2dz)	10	\$7.99	\$79.90

Order Subtotal:\$209.80

Shipments:1
Charges:\$37.76

Sales Tax:\$0.00

Certificates:
Discounts:
Order Total:\$247.56

Personalized items may be shipped separately at no additional charge. If your order was shipped to a PO Box, APO/FPO, or some US territories, your order will be delivered via the United States Postal Service and cannot be tracked.

If you have any questions, please contact us via email at orders@orientaltrading.com, or call us at 1 (800) 228-0475.

Please reference the customer number above for quickest service.

Thank you,

Oriental Trading Customer Service

Oriental Trading Customer Service

orders@orientaltrading.com

1 (800) 228-0475

Customer Service Hours (CST):

Monday-Friday: 6am to 11:00pm

Saturday-Sunday: 6am to 10:00pm

www.orientaltrading.com



4206 South 108th St. Omaha, NE 68137
© 2015 Copyright Oriental Trading Company



Invoice

Date	Invoice #
08/06/2015	7363
Terms	Due Date
Net 15	08/21/2015

Bill To

Eva Marie Lewis
Wisconsin State Crime Lab

Amount Due	Enclosed
\$952.00	

Please detach top portion and return with your payment.

[illegible]

414 536-7646 p
414 536-6939 f
sales@greatimpress.com



Order Confirmation 10856525

Page 1

101 Commerce St
PO Box 320
Oshkosh, WI 54901

www.4imprint.com

Toll Free 877-446-7746
Free Fax 800-355-5043**Main Address**
EVA M LEWIS
STATE OF WISCONSIN
1578 S. 11TH STREET
MILWAUKEE, WI 53204-2860**Invoice Address**
Eva M Lewis
1578 S. 11th Street
Milwaukee WI 53204-2860
USA**Shipping Address**
Eva M Lewis
State of Wisconsin
1578 S. 11th Street
Milwaukee, WI 53204-2860
USA
Tel: (414)382-7500

Fax : 4143827507

Order Number 10856525
Order Date July 29, 2015**Account No.** 3324706
Account Rep. Randi Knabenbauer

Item Table Runner - 29"		Colors (Runner,Trim): Black, Black			
Qty	Item #	Description	Unit \$	Price \$	Total \$
1	5962	Table Runner - 29"	145.0000	145.00	145.00
1	Discounts	Good Will Discount	-17.0600	-17.06	-17.06
1	Discounts	Freight Credit	-4.7100	-4.71	-4.71
1	Set-Up Charge	Set-Up Charge(Per Order Line)	0.0000	0.00	0.00
		Freight		27.88	27.88
				Tax	8.46

Artwork InstructionsProduct Color (Base, Trim): Black,Black
Imprint Location: Front
Imprint Colors: Imprint Unavailable**Grand Total** 159.57**Thank you for your order!**

If you need to make a change -- Please call your account representative. Their name and phone number are shown above.

Shipment Details

Shipment to	Qty	Item #	Must Ship	Carrier, service	Due Date	Freight
Address as above.	1	5962	Aug 06 2015	UPS Next Day Air (Parcel)	Aug 07 2015	27.88

Lewis, Eva M.

From: Carrie Berndt [cberndt@4imprint.com]
Sent: Tuesday, September 01, 2015 5:34 PM
To: Lewis, Eva M.
Subject: RE:

Than you, I have forwarded this to our accounting team for review and you will be contacted regarding the credit for the taxes that were paid on order 1085625.

Thank you,

Carrie Berndt Customer Service Representative
Email cberndt@4imprint.com
Phone 1-877-446-7746 ext 8447
Fax 1-855-781-4009
Web 4imprint.com
Great Place to Work®
Best Small & Medium Workplaces
2013 • 2012 • 2011 • 2010 • 2009 • 2008

From: Lewis, Eva M. [<mailto:LewisEM@DOJ.STATE.WI.US>]
Sent: Tuesday, September 1, 2015 5:31 PM
To: Carrie Berndt <cberndt@4imprint.com>
Subject: FW:

From: Lewis, Eva M.
Sent: Tuesday, September 01, 2015 5:30 PM
To: 'cberndt@4imprint.com'
Subject:

Please credit the tax from the order referenced 10856525 for \$8.46.

Thank you,
Eva Marie



Eva Marie Lewis, CPM
Forensic Science Supervisor - DNA
Wisconsin State Crime Laboratory
1578 S. 11th Street
Milwaukee, WI 53204-2860
(414) 382-7500 Work phone
(414) 382-7507 Work fax
lewisem@doj.state.wi.us

ENTERPRISE RENT-A-CAR INC, 310 W WISCONSIN AVE STE 170A, MILWAUKEE, WI 532032213 (414) 223-3720

RENTAL AGREEMENT REF#
640555 1XQD3M

SUMMARY OF CHARGES

RENTER
LEWIS, EVA

DATE & TIME OUT
08/04/2015 04:23 PM
DATE & TIME IN
08/06/2015 07:34 AM

BILLING CYCLE
24-HOUR

VEH #1 2015 CHEV TAHO 1TN4
VIN# 1GNSKBKC2FR502011
LIC# GAJ8633
MILES DRIVEN 190

CLAIM INFO
JD JUSTICE, DEPT. OF

Charge Description	Date	Quantity	Per	Rate	Total
TIME & DISTANCE	08/04 - 08/06	2	DAY	\$52.93	\$105.86
RAP	08/04 - 08/06	2	DAY	\$4.99	\$9.98
REFUELING CHARGE	08/04 - 08/06	10	GALLON	\$3.99	\$39.90
Subtotal:					\$155.74
Taxes & Surcharges					
TITLE & REGISTRATIONS	08/04 - 08/06	2	DAY	\$0.61	\$1.22
RECOVERY FEE					
Total Charges:					\$156.96

Total Amount Due

\$0.00

PAYMENT INFORMATION

AMOUNT PAID TYPE
\$156.96 Visa

CREDIT CARD NUMBER

[REDACTED] PENDING

Inf
Vehicle returned by staff before I had opportunity to refuel.
08/06/2015

TRAINING AND/OR TRAVEL REQUEST

This form is not required UNLESS you are attending training, conference, or if you are traveling out of state.

EMPLOYEE INFORMATION

Originator of Request (may be different than attendee/traveler) Eva Marie Lewis		Request Date 7/15/2015
Headquarters City Milwaukee	Business Phone Number 414-382-7500	Division/Office DLES

EVENT INFORMATION

Event Type:	PARTICIPATING IN FREE TRAINING		
Title of Training, Conference, or Meeting HID University 15 th Annual "Future Trends in Forensic DNA Technology" DNA Seminar		Sponsoring Organization (Thermo Fisher) Life Technologies	
Location (City & State) Chicago, IL	Departure Date 8/5/2015	Return Date 8/5/2015	
Reason for Attending (please describe content or subject matter of event and how your attendance would benefit the DOJ) Participate in DNA training that focuses on tools, methods, and next-generation solutions that improve efficiency and performance across the human identification workflow. This is directly applicable to work here at DOJ and can satisfy some continuing education for DNA analysts.			Attachments(s) No If yes, forward brochure and/or agenda with request

ATTENDEE INFORMATION – PLEASE COPY THIS SECTION AND FILL OUT FOR EACH INDIVIDUAL ATTENDEE/TRAVELER

TO ADD MORE THAN ONE ATTENDEE/TRAVELER, SELECT INFORMATION BETWEEN THE TWO ARROWS (→) AND CLICK COPY ON THE HOME TAB OF YOUR RIBBON. CLICK BELOW THIS SECTION (OUTSIDE OF THE TABLE) AND CLICK PASTE ON THE HOME TAB OF YOUR RIBBON. REPEAT THIS FOR EACH ADDITIONAL ATTENDEE/TRAVELER.

→ Attendee/Traveler Name (please list each attendee/traveler information separately)
Ron Witucki

Total Cost estimates – Include ALL costs including costs paid by DOJ, individual, or third party.

Type of cost	Estimated Amount (Do not use a range)	P-card (Type "yes" If using a P-card for this expense)	Third Party Reimbursement ⁺	
			Name of third party funding this expense. Only if cost is not being paid by DOJ or attendee/traveler	Indicate if the 3rd party is prepaying for the expense or if the DOJ is being reimbursed
Registration Fees	0.00			
Airfare	0.00			
Auto (see rental car note below)	State Car			
Lodging (see lodging question below if cost exceeds the allowance for the destination city. Allowances can be found here .)	N/A			
Meals	N/A			

⁺ Employees may not receive payment directly from a third party. Payment must be made to Wisconsin Department of Justice. Allowable expenses will be paid to the employee by WI-DOJ and will be limited to maximum amounts in the UTSA guidelines. Each division is responsible for collection of third party reimbursements.

TRAINING AND/OR TRAVEL REQUEST

Other (please specify)				
	N/A			
Total	0.00			
Please explain why a rental car is the most cost efficient mode of transportation.		State car available and reserved		
If cost of lodging exceeds the allowance for the city please provide an explanation for why this lodging option was used. Allowances can be found here.		Event is at the hotel	No other rooms available	Other:
Comments	Cost only associated with travel in State car ←			
ATTENDEE INFORMATION – PLEASE COPY THIS SECTION AND FILL OUT FOR EACH INDIVIDUAL ATTENDEE/TRAVELER TO ADD MORE THAN ONE ATTENDEE/TRAVELER, SELECT INFORMATION BETWEEN THE TWO ARROWS (→) AND CLICK COPY ON THE HOME TAB OF YOUR RIBBON. CLICK BELOW THIS SECTION (OUTSIDE OF THE TABLE) AND CLICK PASTE ON THE HOME TAB OF YOUR RIBBON. REPEAT THIS FOR EACH ADDITIONAL ATTENDEE/TRAVEL.				
→ Attendee/Traveler Name (please list each attendee/traveler information separately)				
Jan Maly				
Total Cost estimates – Include ALL costs including costs paid by DOJ, individual, or third party.				
			Third Party Reimbursement ⁺	
Type of cost	Estimated Amount (Do not use a range)	P-card (Type "yes" if using a P-card for this expense)	Name of third party funding this expense. Only if cost is not being paid by DOJ or attendee/traveler	Indicate if the 3rd party is prepaying for the expense or if the DOJ is being reimbursed
Registration Fees	0.00			
Airfare	0.00			
Auto (see rental car note below)	State Car			
Lodging (see lodging question below if cost exceeds the allowance for the destination city. Allowances can be found here.)	N/A			
Meals	N/A			
Other (please specify)	N/A			
Total	0.00			
Please explain why a rental car is the most cost efficient mode of transportation.		State car available and reserved		
If cost of lodging exceeds the allowance for the city please provide an explanation for why this lodging option was used. Allowances can be found here.		Event is at the hotel	No other rooms available	Other:
Comments	Cost only associated with travel in State car ←			
ATTENDEE INFORMATION – PLEASE COPY THIS SECTION AND FILL OUT FOR EACH INDIVIDUAL ATTENDEE/TRAVELER TO ADD MORE THAN ONE ATTENDEE/TRAVELER, SELECT INFORMATION BETWEEN THE TWO ARROWS (→) AND CLICK COPY ON THE HOME TAB OF YOUR RIBBON. CLICK BELOW THIS SECTION (OUTSIDE OF THE TABLE) AND CLICK PASTE ON THE HOME TAB OF YOUR RIBBON. REPEAT THIS FOR EACH ADDITIONAL ATTENDEE/TRAVEL.				

⁺ Employees may not receive payment directly from a third party. Payment must be made to Wisconsin Department of Justice. Allowable expenses will be paid to the employee by WI-DOJ and will be limited to maximum amounts in the UTSA guidelines. Each division is responsible for collection of third party reimbursements.

TRAINING AND/OR TRAVEL REQUEST

➔ Attendee/Traveler Name (please list each attendee/traveler information separately)

Sharon Polakowski

Total Cost estimates – Include ALL costs including costs paid by DOJ, individual, or third party.

Type of cost	Estimated Amount (Do not use a range)	P-card (Type "yes" if using a P-card for this expense)	Third Party Reimbursement ⁺	
			Name of third party funding this expense. Only if cost is not being paid by DOJ or attendee/traveler	Indicate if the 3rd party is prepaying for the expense or if the DOJ is being reimbursed
Registration Fees	0.00			
Airfare	0.00			
Auto (see rental car note below)	State Car			
Lodging (see lodging question below if cost exceeds the allowance for the destination city. Allowances can be found here .)	N/A			
Meals	N/A			
Other (please specify)	N/A			
Total	0.00			

Please explain why a rental car is the most cost efficient mode of transportation.

State car available and reserved

If cost of lodging exceeds the allowance for the city please provide an explanation for why this lodging option was used. Allowances can be found [here](#).

Event is at the hotel

No other rooms available

Other:

Comments Cost only associated with travel in State car /Polakowski for Lewis Group representation ←

ATTENDEE INFORMATION – PLEASE COPY THIS SECTION AND FILL OUT FOR EACH INDIVIDUAL ATTENDEE/TRAVELER
TO ADD MORE THAN ONE ATTENDEE/TRAVELER, SELECT INFORMATION BETWEEN THE TWO ARROWS (➔) AND CLICK COPY ON THE HOME TAB OF YOUR RIBBON. CLICK BELOW THIS SECTION (OUTSIDE OF THE TABLE) AND CLICK PASTE ON THE HOME TAB OF YOUR RIBBON. REPEAT THIS FOR EACH ADDITIONAL ATTENDEE/TRAVEL.

➔ Attendee/Traveler Name (please list each attendee/traveler information separately)

Amber Rasmussen

Total Cost estimates – Include ALL costs including costs paid by DOJ, individual, or third party.

Type of cost	Estimated Amount (Do not use a range)	P-card (Type "yes" if using a P-card for this expense)	Third Party Reimbursement ⁺	
			Name of third party funding this expense. Only if cost is not being paid by DOJ or attendee/traveler	Indicate if the 3rd party is prepaying for the expense or if the DOJ is being reimbursed
Registration Fees	0.00			
Airfare	0.00			
Auto (see rental car note below)	State Car			
Lodging (see lodging question below if cost exceeds the allowance for the destination city. Allowances can be found here .)	N/A			

⁺ Employees may not receive payment directly from a third party. Payment must be made to Wisconsin Department of Justice. Allowable expenses will be paid to the employee by WI-DOJ and will be limited to maximum amounts in the UTSA guidelines. Each division is responsible for collection of third party reimbursements.

TRAINING AND/OR TRAVEL REQUEST

als	N/A			
ther (please specify)	N/A			
Total	0.00			
Please explain why a rental car is the most cost efficient mode of transportation.		State car available and reserved		
If cost of lodging exceeds the allowance for the city please provide an explanation for why this lodging option was used. Allowances can be found here.		Event is at the hotel	No other rooms available	Other:
Comments	Cost only associated with travel in State car ←			
ATTENDEE INFORMATION – PLEASE COPY THIS SECTION AND FILL OUT FOR EACH INDIVIDUAL ATTENDEE/TRAVELER TO ADD MORE THAN ONE ATTENDEE/TRAVELER, SELECT INFORMATION BETWEEN THE TWO ARROWS (→) AND CLICK COPY ON THE HOME TAB OF YOUR RIBBON. CLICK BELOW THIS SECTION (OUTSIDE OF THE TABLE) AND CLICK PASTE ON THE HOME TAB OF YOUR RIBBON. REPEAT THIS FOR EACH ADDITIONAL ATTENDEE/TRAVEL.				
→ Attendee/Traveler Name (please list each attendee/traveler information separately) Nicole Hinton				
Total Cost estimates – Include ALL costs including costs paid by DOJ, individual, or third party.				
Type of cost	Estimated Amount (Do not use a range)	P-card (Type "yes" if using a P-card for this expense)	Third Party Reimbursement [†]	
			Name of third party funding this expense. Only if cost is not being paid by DOJ or attendee/traveler	Indicate if the 3rd party is prepaying for the expense or if the DOJ is being reimbursed
Registration Fees	0.00			
Airfare	0.00			
Auto (see rental car note below)	State Car			
Lodging (see lodging question below if cost exceeds the allowance for the destination city. Allowances can be found here .)	N/A			
Meals	N/A			
Other (please specify)	N/A			
Total	0.00			
Please explain why a rental car is the most cost efficient mode of transportation.		State car available and reserved		
If cost of lodging exceeds the allowance for the city please provide an explanation for why this lodging option was used. Allowances can be found here.		Event is at the hotel	No other rooms available	Other:
Comments	Cost only associated with travel in State car, mileage may be necessary if too crowded in State car." ←			

FUNDING SOURCE	
----------------	--

[†] Employees may not receive payment directly from a third party. Payment must be made to Wisconsin Department of Justice. Allowable expenses will be paid to the employee by WI-DOJ and will be limited to maximum amounts in the UTSA guidelines. Each division is responsible for collection of third party reimbursements.

TRAINING AND/OR TRAVEL REQUEST

Fund	Org	Sub Org	Activity Code	Appr	Reporting Cat.
100	427p	22		221 4	

APPROVALS		
Required for all types of requests	Eva Marie Lewis/C. Cowie/JLC	7/20/2015
	Immediate Supervisor	Date
Required for all types of requests except free training	Brian R. O'Keefe	7/20/2015
	Division Administrator or Designee	Date
Required for all Out-of-State Travel	Karen Van Schoonhoven	7/20/2015
	Budget Director	Date

This year's seminar series visits three cities across the US and features presentations and live demos delivered by forensic scientists for forensic scientists.

Topics include:

- Get decision support to help streamline sexual assault sample processing.
- Are you ready for the new CODIS loci? Learn validation tips and tricks from the experts on our professional services team.
- How Applied Biosystems™ YFiler™ Plus PCR Amplification Kit can help improve your first-pass success rate with challenging casework and sexual assault samples.
- Increase discrimination of degraded DNA samples with next-generation se

Other topics to be announced

* Employees may not receive payment directly from a third party. Payment must be made to Wisconsin Department of Justice. Allowable expenses will be paid to the employee by WI-DOJ and will be limited to maximum amounts in the UTSA guidelines. Each division is responsible for collection of third party reimbursements.

PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll) Donna G Hahn	For Statement Date: 8-14-15
Purchasing Card Number (last 4 digits only): [REDACTED]	

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased. For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory Number for items is \$5,000 or less
08-04	Glendale Parade Store/NJ	Floor Stand Carrying Cases for flags				\$103.00 ✓	
08-04	Crime Scene/AZ	Crime Lab items for conferences				\$448.50 ✓	
08-04	Amazon/WA	Plano Telescoping Rod Case/Flag Case				\$70.84 ✓	
08-04	Amazon/WA	Plano Telescoping Rod Case/Flag Case				\$70.84 ✓	
08-04	Amazon/WA	Plano Telescoping Rod Case/Flag Case				\$70.85 ✓	
08-04	Amazon/WA	Plano Telescoping Rod Case/Flag Case				\$70.85 ✓	
08-04	Amazon/WA	Flag Box and Organizer for laptops				\$60.58 ✓	
08-04	Amazon/WA	6 Laptop case for conferences				\$217.43 ✓	
08-05	Staples/MI	Extension cords for conferences				\$85.02 ✓	

CARD TOTAL \$1197.91 ✓

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

<u>Donna G Hahn</u> Cardholder	<u>9-2-15</u> Date	<u>[Signature]</u> Supervisor	<u>9-4-15</u> Date
-----------------------------------	-----------------------	----------------------------------	-----------------------

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

<u>[Signature]</u>	<u>9/25/15</u>
--------------------	----------------

10/01/15
[Signature]



U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

ST OF WI - DOJ

ACCOUNT NUMBER

STATEMENT DATE

08-14-15

TOTAL ACTIVITY

\$ 1,197.91

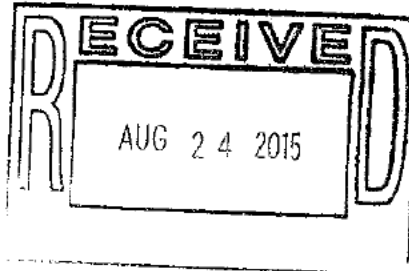
000001231 1 AV 0.391 106481155395618 P

DONNA G HAHN

TAX

WI DEPT OF JUSTICE TS
17 W. MAIN ST.
MADISON WI 53703-3960

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT



Cardholder

Signature _____ Date _____

Approver

Signature _____ Date _____

1 email with

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
08-05	08-04	GLENDAL PARADE STORE LL 800-653-5515 NJ PUR ID: 0100015138 TAX: 0.00	24323005216207762400430	1799	103.00 ✓
08-05	08-04	CRIME SCENE 602-274-7280 AZ PUR ID: A32JQ5AN8MBTU TAX: 0.00	24492155216894537837174	5310	448.50 ✓
08-05	08-04	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA PUR ID: 103-0457591-45394 TAX: 0.00	24692165216000811267982	5942	70.84 ✓
08-05	08-04	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA PUR ID: 103-0457591-45394 TAX: 0.00	24692165216000811269491	5942	70.84 ✓
08-05	08-04	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA PUR ID: 103-0457591-45394 TAX: 0.00	24692165216000813531344	5942	70.85 ✓
08-05	08-04	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA PUR ID: 103-0457591-45394 TAX: 0.00	24692165216000813958349	5942	70.85 ✓
08-05	08-04	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA PUR ID: 103-0457591-45394 TAX: 0.00	24692165216000855041228	5942	60.58 ✓
08-05	08-04	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA PUR ID: 103-0457591-45394 TAX: 0.00	24692165216000867134888	5942	217.43 ✓
08-06	08-05	STAPLS0136663983000001 877-8267755 MI PUR ID: W0011919 TAX: 0.00	24164075217105040262263	5111	85.02 ✓

DT)

merican

Default Accounting Code: 455TS TS017

CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER [REDACTED]		ACCOUNT SUMMARY	
	STATEMENT DATE 08-14-15	DISPUTED AMOUNT \$.00	PREVIOUS BALANCE	\$.00
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 8335 FARGO, ND 58125-8335	AMOUNT DUE \$ 0.00 DO NOT REMIT		PURCHASES & OTHER CHARGES	\$1,197.91
			CASH ADVANCES	\$.00
			CASH ADVANCE FEE	\$.00
			CREDITS	\$.00
			TOTAL ACTIVITY		$1,197.91

Donna G.

m: Glendale Parade Store Sales <orders@glendale.com>
nt: Monday, August 03, 2015 11:47 AM
o: Hahn, Donna G.
Subject: Glendale Parade Store: New Order # 100015138



Hello, Donna Hahn

Thank you for your order from Glendale Parade Store. Once your package ships we will send an email with a link to track your order. If you have any questions about your order please contact us at customerservice@glendale.com or call us at 800-653-5515 Monday - Friday, 8am - 5pm PST.

Your order confirmation is below. Thank you again for your business.

Your Order #100015138 (placed on August 3, 2015 12:46:44 PM EDT)

Billing Information:

Donna Hahn
WI Department of Justice
17 W. Main Street
8th Floor
Madison, Wisconsin, 53703
United States
T: 608-266-5710

Payment Method:

Credit Card (Visa, Mastercard, Discover, American Express)

Credit Card Type: Visa

Credit Card Number: [REDACTED]

Processed Amount: \$103.00

Shipping Information:

Donna Hahn
WI Department of Justice
17 W. Main Street
8th Floor
Madison, Wisconsin, 53703
United States
T: 608-266-5710

Shipping Method:

Address Type - Business

Item	SKU	Qty	Subtotal
Floor Stand Carrying Case	35	4	\$90.00
Subtotal			\$90.00
Shipping & Handling			\$13.00
Grand Total			\$103.00

Thank you again, **Glendale Parade Store**

1 - 0 0 0 0 *

Shipping Address:
Donna Hahn
17 W. Main Street, 8th Fl
Po Box 7857
Madison, WI 53707-7857



Order number: 80376 Hahn



Order Date: 8/4/2015
Shipping Method: Free Shipping (Delivery in 5-7 days. Varies based
Shipment Weight:

Thank you for your order. We hope you are happy with the products and we encourage you to tell us how we can improve. If you'd like to share your purchase experience you can post a product review by going to the product and clicking the button, "Product Reviews." Come back for a repeat purchase and take 10% off your order. To get this discount, enter the word return in the coupon area, on the payment page.

Supply Store

3440 N 16th St #4
Phoenix, Arizona 85016
<http://www.crimescene.com>

Order: 80376 Hahn

Placed: 8/4/2015

Ship To

Donna Hahn
Wisconsin Department Of Justice
17 W. Main Street, 8th Fl
Po Box 7857
Madison, Wisconsin 53707-7857

Bill To

Donna Hahn
Wisconsin Department Of Justice
17 W. Main Street, 8th Fl
Po Box 7857
Madison, Wisconsin 53707-7857

Item #	Name	QTY	Price	Total
11754	Crime Scene Bandages	12	5.50	66.00
SWEETCSI	Crime Scene Candy	30	3.75	112.50
MURDERPAD	Murder Ink Sticky Notes	6	12.50	75.00
SWEET-TT	Candy Blood Clots	40	1.25	50.00
CSI-12244	Crime Scene Sandwich Bags	20	4.75	95.00
SWEET-BIO	Bio-Hazard Candy	20	2.50	50.00

Shipment Weight: lbs

Sub Total: 448.50
Free Shipping (Delivery in 5-7 days. Varies based on destination.): 0.00
Order Total: 448.50

FORENSIC SUPPLIES FOR LAW ENFORCEMENT & THE PUBLIC. [My Account \(https://www.crimescene.com/store/index.php?main_page=account&zenid=a07vjkqc4c4rgilv39cak8m83\)](https://www.crimescene.com/store/index.php?main_page=account&zenid=a07vjkqc4c4rgilv39cak8m83)
 \$ US Dollar (https://www.crimescene.com/store/index.php?main_page=account_history_info&order_id=80376¤cy=USD&zenid=a07vjkqc4c4rgilv39cak8m83)



(http://www.crimescene.com/store/)

- [Search \(index.php?main_page=advanced_search\)](https://www.crimescene.com/store/index.php?main_page=advanced_search)
- [Checkout \(index.php?main_page=checkout_shipping\)](https://www.crimescene.com/store/index.php?main_page=checkout_shipping)
- [Contact Us \(index.php?main_page=contact_us\)](https://www.crimescene.com/store/index.php?main_page=contact_us)
- [Log Out \(https://www.crimescene.com/store/index.php?main_page=logoff&zenid=a07vjkqc4c4rgilv39cak8m83\)](https://www.crimescene.com/store/index.php?main_page=logoff&zenid=a07vjkqc4c4rgilv39cak8m83)
- [0\\$0.00](#)



ORDER #80376

[Home \(https://www.crimescene.com/store/\)](https://www.crimescene.com/store/) > [My Account \(https://www.crimescene.com/store/index.php?main_page=account&zenid=a07vjkqc4c4rgilv39cak8m83\)](https://www.crimescene.com/store/index.php?main_page=account&zenid=a07vjkqc4c4rgilv39cak8m83) > [History \(https://www.crimescene.com/store/index.php?main_page=account_history_info&order_id=80376¤cy=USD&zenid=a07vjkqc4c4rgilv39cak8m83\)](https://www.crimescene.com/store/index.php?main_page=account_history_info&order_id=80376¤cy=USD&zenid=a07vjkqc4c4rgilv39cak8m83)



Order Date: Tuesday 04 August, 2015

ORDER INFORMATION - ORDER #80376

	Qty.	Products	Total
SEARCH	20 ea.	Crime Scene Sandwich Bags	\$95.00
<input type="text"/>	12 ea.	Crime Scene Bandages	\$66.00
Advanced Search (http://www.crimescene.com/store/index.php?main_page=advanced_search&zenid=a07vjkqc4c4rgilv39cak8m83)	40 ea.	Candy Blood Clots	\$50.00
	30 ea.	Murder Ink Sticky Notes	\$75.00
	20 ea.	Crime Scene Candy	\$112.50
CATEGORIES	20 ea.	Bio-Hazard Candy	\$50.00

BLOOD TESTS

(http://www.crimescene.com/store/index.php?

MAIN_PAGE=INDEX&CPATH=66&ZENID=A07VJGCO4C4RGILV39CAK8M83)

BODY BAGS

(http://www.crimescene.com/store/index.php?

MAIN_PAGE=INDEX&CPATH=55&ZENID=A07VJGCO4C4RGILV39CAK8M83)

CASTING KITS

(http://www.crimescene.com/store/index.php?

MAIN_PAGE=INDEX&CPATH=60&ZENID=A07VJGCO4C4RGILV39CAK8M83)

CHILD IDENTIFICATION

(http://www.crimescene.com/store/index.php?

MAIN_PAGE=INDEX&CPATH=62&ZENID=A07VJGCO4C4RGILV39CAK8M83)

CLEARANCE ITEMS

(http://www.crimescene.com/store/index.php?

MAIN_PAGE=INDEX&CPATH=49&ZENID=A07VJGCO4C4RGILV39CAK8M83)

CRIME SCENE TAPE

(http://www.crimescene.com/store/index.php?

MAIN_PAGE=INDEX&CPATH=56&ZENID=A07VJGCO4C4RGILV39CAK8M83)

DETECTIVE SUPPLIES

(http://www.crimescene.com/store/index.php?

MAIN_PAGE=INDEX&CPATH=29&ZENID=A07VJGCO4C4RGILV39CAK8M83)

SHIPPING METHOD

Sub-Total: \$448.50
 Free Shipping (Delivery in 5-7 days. Varies based on destination.): \$0.00
 Total: \$448.50

Comments

Transaction ID: [REDACTED]
 Payment Type: Credit Card (WPP)
 Timestamp: 2015-08-04T19:34:08Z
 Payment Status: Completed
 AVS Code: A
 CVV2 Code: M
 Amount: 448.50 USD

BILLING ADDRESS

Wisconsin Department of Justice
 Donna Hahn
 17 W. Main Street, 8th Fl
 PO Box 7857
 Madison, WI 53707-7857
 United States

PAYMENT METHOD

Credit Card



(http://www.instantssl.com)

DETECTIVE WEAR Free Shipping (Delivery in 5-7 days. Varies based on destination.)
([HTTP://WWW.CRIMESCENE.COM/STORE/INDEX.PHP?](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=22&ZENID=A07VJKGC04C4RGILV39CAK8M83))
[MAIN_PAGE=INDEX&CPATH=22&ZENID=A07VJKGC04C4RGILV39CAK8M83](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=22&ZENID=A07VJKGC04C4RGILV39CAK8M83)

EVIDENCE MARKING
([HTTP://WWW.CRIMESCENE.COM/STORE/INDEX.PHP?](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=58&ZENID=A07VJKGC04C4RGILV39CAK8M83))
[MAIN_PAGE=INDEX&CPATH=58&ZENID=A07VJKGC04C4RGILV39CAK8M83](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=58&ZENID=A07VJKGC04C4RGILV39CAK8M83)

EVIDENCE PACKAGING
([HTTP://WWW.CRIMESCENE.COM/STORE/INDEX.PHP?](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=52&ZENID=A07VJKGC04C4RGILV39CAK8M83))
[MAIN_PAGE=INDEX&CPATH=52&ZENID=A07VJKGC04C4RGILV39CAK8M83](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=52&ZENID=A07VJKGC04C4RGILV39CAK8M83)

FORENSIC LIGHTING
([HTTP://WWW.CRIMESCENE.COM/STORE/INDEX.PHP?](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=57&ZENID=A07VJKGC04C4RGILV39CAK8M83))
[MAIN_PAGE=INDEX&CPATH=57&ZENID=A07VJKGC04C4RGILV39CAK8M83](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=57&ZENID=A07VJKGC04C4RGILV39CAK8M83)

FREE VIDEOS
([HTTP://WWW.CRIMESCENE.COM/STORE/INDEX.PHP?](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=64&ZENID=A07VJKGC04C4RGILV39CAK8M83))
[MAIN_PAGE=INDEX&CPATH=64&ZENID=A07VJKGC04C4RGILV39CAK8M83](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=64&ZENID=A07VJKGC04C4RGILV39CAK8M83)

INFIDELITY TESTS
([HTTP://WWW.CRIMESCENE.COM/STORE/INDEX.PHP?](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=68&ZENID=A07VJKGC04C4RGILV39CAK8M83))
[MAIN_PAGE=INDEX&CPATH=68&ZENID=A07VJKGC04C4RGILV39CAK8M83](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=68&ZENID=A07VJKGC04C4RGILV39CAK8M83)

PHOTOGRAPHY
([HTTP://WWW.CRIMESCENE.COM/STORE/INDEX.PHP?](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=53&ZENID=A07VJKGC04C4RGILV39CAK8M83))
[MAIN_PAGE=INDEX&CPATH=53&ZENID=A07VJKGC04C4RGILV39CAK8M83](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=53&ZENID=A07VJKGC04C4RGILV39CAK8M83)

POPULAR GIFT IDEAS
([HTTP://WWW.CRIMESCENE.COM/STORE/INDEX.PHP?](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=47&ZENID=A07VJKGC04C4RGILV39CAK8M83))
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PRINTING WITH INK
([HTTP://WWW.CRIMESCENE.COM/STORE/INDEX.PHP?](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=51&ZENID=A07VJKGC04C4RGILV39CAK8M83))
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PRINTING WITH POWDER
([HTTP://WWW.CRIMESCENE.COM/STORE/INDEX.PHP?](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=59&ZENID=A07VJKGC04C4RGILV39CAK8M83))
[MAIN_PAGE=INDEX&CPATH=59&ZENID=A07VJKGC04C4RGILV39CAK8M83](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=59&ZENID=A07VJKGC04C4RGILV39CAK8M83)

SAFETY SUPPLY
([HTTP://WWW.CRIMESCENE.COM/STORE/INDEX.PHP?](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=61&ZENID=A07VJKGC04C4RGILV39CAK8M83))
[MAIN_PAGE=INDEX&CPATH=61&ZENID=A07VJKGC04C4RGILV39CAK8M83](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=61&ZENID=A07VJKGC04C4RGILV39CAK8M83)

SCIENCE EDUCATION
([HTTP://WWW.CRIMESCENE.COM/STORE/INDEX.PHP?](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=50&ZENID=A07VJKGC04C4RGILV39CAK8M83))
[MAIN_PAGE=INDEX&CPATH=50&ZENID=A07VJKGC04C4RGILV39CAK8M83](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=50&ZENID=A07VJKGC04C4RGILV39CAK8M83)

SPY SUPPLY
([HTTP://WWW.CRIMESCENE.COM/STORE/INDEX.PHP?](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=74&ZENID=A07VJKGC04C4RGILV39CAK8M83))
[MAIN_PAGE=INDEX&CPATH=74&ZENID=A07VJKGC04C4RGILV39CAK8M83](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=74&ZENID=A07VJKGC04C4RGILV39CAK8M83)

THEFT DETECTION
([HTTP://WWW.CRIMESCENE.COM/STORE/INDEX.PHP?](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=54&ZENID=A07VJKGC04C4RGILV39CAK8M83))
[MAIN_PAGE=INDEX&CPATH=54&ZENID=A07VJKGC04C4RGILV39CAK8M83](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=54&ZENID=A07VJKGC04C4RGILV39CAK8M83)

FREE WITH PURCHASE
([HTTP://WWW.CRIMESCENE.COM/STORE/INDEX.PHP?](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=30&ZENID=A07VJKGC04C4RGILV39CAK8M83))
[MAIN_PAGE=INDEX&CPATH=30&ZENID=A07VJKGC04C4RGILV39CAK8M83](http://www.crimescene.com/store/index.php?main_page=INDEX&CPATH=30&ZENID=A07VJKGC04C4RGILV39CAK8M83)



(<http://www.instantssl.com>)

, Donna G.

From: Behnke, Elizabeth A.
Sent: Wednesday, July 22, 2015 3:02 PM
To: Hahn, Donna G.
Subject: FW: Flag and base cases

I am going to consider this a DOA waiver at this point. When you are ready to purchase your flag accessories just put this email with it as documentation.

From: Teske, David - DOA [<mailto:David.Teske@wisconsin.gov>]
Sent: Wednesday, July 22, 2015 3:00 PM
To: Behnke, Elizabeth A.
Subject: RE: Flag and base cases

Well, best of luck to you. Feel free to use your best judgment. I kinda like the bazooka fishing rod tube.

David Teske, CPPO
608 264-9590

*"If your actions inspire others to dream more, learn more, do more and become more, you are a leader."
-John Quincy Adams*

From: Behnke, Elizabeth A. [<mailto:behnkeea@doj.state.wi.us>]
Sent: Wednesday, July 22, 2015 2:54 PM
To: Teske, David - DOA
Subject: RE: Flag and base cases

Yes, we did check with Eder flag first and have also checked with the other vendors on the state contract.

We have also been talking Honor Guard to see where they obtain their flag cases and what brands they use.

From: Teske, David - DOA [<mailto:David.Teske@wisconsin.gov>]
Sent: Wednesday, July 22, 2015 2:49 PM
To: Behnke, Elizabeth A.
Subject: FW: Flag and base cases

I guess Eder flag doesn't have them.

David Teske, CPPO
608 264-9590

*"If your actions inspire others to dream more, learn more, do more and become more, you are a leader."
-John Quincy Adams*

From: Jodi G [<mailto:Jodig@ederflag.com>]
Sent: Wednesday, July 22, 2015 2:48 PM
To: Teske, David - DOA
Subject: RE: Flag and base cases

Hi, David-

We do not carry these products.

Jodi

From: Teske, David - DOA [mailto:David.Teske@wisconsin.gov]

Sent: Wednesday, July 22, 2015 2:42 PM

To: Jodi G

Subject: Flag and base cases

Jodi,

Do you carry these items?

<http://www.paradestore.com/index.php/our-products/flag-covers-cases/flag-carrying-case.html>

<http://www.paradestore.com/index.php/floor-stand-carrying-case.html>

D.J. Teske, CPPO

State Bureau of Procurement

101 E. Wilson, 6th floor

Madison, WI 53707

608 264-9590

And those who were seen dancing were thought to be insane, by those who could not hear the music....Friedrich Nietzsche

amazon.com

Final Details for Order #103-0457591-4539437Print this page for your records.**Order Placed:** August 3, 2015**Amazon.com order number:** 103-0457591-4539437**Order Total:** \$561.39**Shipped on August 4, 2015****Items Ordered****Price**1 of: *Sterilite 2194-2024 Sterilite Large Clip Box 19638606*

\$14.95

Sold by: Excellent Brands ([seller profile](#))

Condition: New

1 of: *Pelican 1609 - Lid Organizer for 1600 Case - Ballistic Nylon*

\$39.99

Sold by: Limited Goods ([seller profile](#))

Condition: New

Shipping Address:

Sara Phelan - Wisconsin Department of Justice

17 W MAIN ST

MADISON, WI 53703-3960

United States

Item(s) Subtotal: \$54.94

Shipping & Handling: \$5.64

Total before tax: \$60.58

Sales Tax: \$0.00

Shipping Speed:

Standard Shipping

Total for This Shipment: \$60.58

Shipped on August 4, 2015**Items Ordered****Price**1 of: *Pelican 1620-021-110 Large Rolling Hardware and Accessory Case without Foam*

\$198.06

Sold by: Amazon.com LLC

Condition: New

Shipping Address:

Sara Phelan - Wisconsin Department of Justice

17 W MAIN ST

MADISON, WI 53703-3960

United States

Item(s) Subtotal: \$198.06

Shipping & Handling: \$19.37

Total before tax: \$217.43

Sales Tax: \$0.00

Shipping Speed:

Standard Shipping

Total for This Shipment: \$217.43

Shipped on August 4, 2015**Items Ordered****Price**

1 of: *Plano Airliner Telescoping Rod Case*

\$59.99

Sold by: Amazon.com LLC

Condition: New

Shipping Address:

Sara Phelan - Wisconsin Department of Justice
17 W MAIN ST
MADISON, WI 53703-3960
United States

Item(s) Subtotal: \$59.99

Shipping & Handling: \$10.86

Total before tax: \$70.85

Sales Tax: \$0.00

Shipping Speed:

Standard Shipping

Total for This Shipment: \$70.85

Shipped on August 4, 2015**Items Ordered**1 of: *Plano Airliner Telescoping Rod Case***Price**

\$59.99

Sold by: Amazon.com LLC

Condition: New

Shipping Address:

Sara Phelan - Wisconsin Department of Justice
17 W MAIN ST
MADISON, WI 53703-3960
United States

Item(s) Subtotal: \$59.99

Shipping & Handling: \$10.85

Total before tax: \$70.84

Sales Tax: \$0.00

Shipping Speed:

Standard Shipping

Total for This Shipment: \$70.84

Shipped on August 4, 2015**Items Ordered**1 of: *Plano Airliner Telescoping Rod Case***Price**

\$59.99

Sold by: Amazon.com LLC

Condition: New

Shipping Address:

Sara Phelan - Wisconsin Department of Justice
17 W MAIN ST
MADISON, WI 53703-3960
United States

Item(s) Subtotal: \$59.99

Shipping & Handling: \$10.85

Total before tax: \$70.84

Sales Tax: \$0.00

Shipping Speed:

Standard Shipping

Total for This Shipment: \$70.84

Shipped on August 4, 2015

Items Ordered1 of: *Plano Airliner Telescoping Rod Case*

Sold by: Amazon.com LLC

Condition: New

Price

\$59.99

Shipping Address:

Sara Phelan - Wisconsin Department of Justice

17 W MAIN ST

MADISON, WI 53703-3960

United States

Item(s) Subtotal: \$59.99

Shipping & Handling: \$10.86

Total before tax: \$70.85

Sales Tax: \$0.00

Shipping Speed:

Standard Shipping

Total for This Shipment: \$70.85

Payment information**Payment Method:**

Visa | Last digits: [REDACTED]

Item(s) Subtotal: \$492.96

Shipping & Handling: \$68.43

Billing address

Sara Phelan - Wisconsin Department of Justice

17 W MAIN ST

MADISON, WI 53703-3960

United States

Total before tax: \$561.39

Estimated tax to be collected: \$0.00

Grand Total: \$561.39**Credit Card transactions**

Visa ending in [REDACTED]: August 4, 2015: \$70.84

Visa ending in [REDACTED]: August 4, 2015: \$70.84

Visa ending in [REDACTED]: August 4, 2015: \$70.85

Visa ending in [REDACTED]: August 4, 2015: \$70.85

Visa ending in [REDACTED]: August 4, 2015: \$60.58

Visa ending in [REDACTED]: August 4, 2015: \$217.43

To view the status of your order, return to [Order Summary](#).**Please note:** This is not a VAT invoice.[Conditions of Use](#) | [Privacy Notice](#) © 1996-2015, Amazon.com, Inc. or its affiliates

I, Donna G.

From: Behnke, Elizabeth A.
Sent: Wednesday, July 22, 2015 3:02 PM
To: Hahn, Donna G.
Subject: FW: Flag and base cases

I am going to consider this a DOA waiver at this point. When you are ready to purchase your flag accessories just put this email with it as documentation.

From: Teske, David - DOA [<mailto:David.Teske@wisconsin.gov>]
Sent: Wednesday, July 22, 2015 3:00 PM
To: Behnke, Elizabeth A.
Subject: RE: Flag and base cases

Well, best of luck to you. Feel free to use your best judgment. I kinda like the bazooka fishing rod tube.

David Teske, CPPO
608 264-9590

*"If your actions inspire others to dream more, learn more, do more and become more, you are a leader."
-John Quincy Adams*

From: Behnke, Elizabeth A. [<mailto:behnkeea@doj.state.wi.us>]
Sent: Wednesday, July 22, 2015 2:54 PM
To: Teske, David - DOA
Subject: RE: Flag and base cases

Yes, we did check with Eder flag first and have also checked with the other vendors on the state contract.

We have also been talking Honor Guard to see where they obtain their flag cases and what brands they use.

From: Teske, David - DOA [<mailto:David.Teske@wisconsin.gov>]
Sent: Wednesday, July 22, 2015 2:49 PM
To: Behnke, Elizabeth A.
Subject: FW: Flag and base cases

I guess Eder flag doesn't have them.

David Teske, CPPO
608 264-9590

*"If your actions inspire others to dream more, learn more, do more and become more, you are a leader."
-John Quincy Adams*

From: Jodi G [<mailto:Jodig@ederflag.com>]
Sent: Wednesday, July 22, 2015 2:48 PM
To: Teske, David - DOA
Subject: RE: Flag and base cases

Hi, David-

We do not carry these products.

Jodi

From: Teske, David - DOA [mailto:David.Teske@wisconsin.gov]

Sent: Wednesday, July 22, 2015 2:42 PM

To: Jodi G

Subject: Flag and base cases

Jodi,

Do you carry these items?

<http://www.paradestore.com/index.php/our-products/flag-covers-cases/flag-carrying-case.html>

<http://www.paradestore.com/index.php/floor-stand-carrying-case.html>

D. J. Teske, CPPO

State Bureau of Procurement

101 E. Wilson, 6th floor

Madison, WI 53707

608 264-9590

And those who were seen dancing were thought to be insane, by those who could not hear the music....Friedrich Nietzsche



Order#	Ship Date	Order Date	Master Number
0136663983-000-001	08/04/2015	08/04/2015	0001817305
Deliver to	Phone#	Ordered by	
DONNA HAHN	608-2665710-55555	HAHNDG@DOJ.STATE.WI.US	
Budget Center	Purchase Order#	Release#	
W0011919	W0011919		

Ship to **RISSE**: ST OF WI
 17 W MAIN ST
 8TH FLOOR, DLES/BBF
 MADISON, WI 53703

CREDIT CARD RECEIPT

Order Line#	SKU	Product Description	Budget Center	Order UOM	Qty Ord	Qty Ship	Unit Price	Extended Price
1	FEL99089	FELLOWES 7-OUTLET METAL POWER	W0011919	EA	6	6	\$14.17	\$85.02

Subtotal	\$85.02
Freight/Misc Charges	\$0.00
Tax	\$0.00

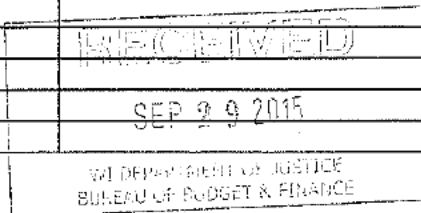
Last 4 Digits of Credit Card:	Amount Paid via Credit Card	\$85.02
-------------------------------	-----------------------------	---------

PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll) Michelle Sandry	For Statement Date: 8-28-15
Purchasing Card Number (last 4 digits only): [REDACTED]	

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased. For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory Number for items is \$5,000 or less
8-18-15	Sunset Hill Stoneware	Remainder of costs for giveaway for Jail Administrators Conference				60.00	✓



CARD TOTAL \$60.00

Jail Admin.
Conf. JR Done-
ja

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

<u>Michelle Sandry</u> Cardholder	<u>9-8-15</u> Date	<u>Sta. [Signature]</u> Supervisor	<u>9/8/15</u> Date
--------------------------------------	-----------------------	---------------------------------------	-----------------------

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

<u>[Signature]</u> Div/Bureau P-Card Coordinator	<u>9/29/15</u> Date
---	------------------------

10/27/15
[Signature]



U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

ST OF WI - DOJ

Invoice

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 08-28-15
TOTAL ACTIVITY \$ 60.00

	Invoice #
15	21979

000001220 1 AV 0.391 106481172859222 P
MICHELLE M SANDRY
TAX [REDACTED]
WI DEPT OF JUSTICE TS
17 W MAIN ST
MADISON WI 53703-3960

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT

Cardholder Signature _____ Date _____
Approver Signature _____ Date _____

NEW ACCOUNT ACTIVITY					
POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
08-18	08-18	SUNSET HILL STONEWARE 920-886-1727 WI PUR ID: 00000000000000000000 TAX: 0.00	24692165230000260200494	5719	60.00

	Rep
	SS
	Amount
2.75	2,231.25
15.00	75.00
4.00	60.00

Default Accounting Code: 455TS TS009		
CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER [REDACTED]	
	STATEMENT DATE 08-28-15	DISPUTED AMOUNT \$.00
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	AMOUNT DUE \$ 0.00 DO NOT REMIT	
	PREVIOUS BALANCE \$0.00	
	PURCHASES & OTHER CHARGES \$60.00	
	CASH ADVANCES \$0.00	
	CASH ADVANCE FEE \$0.00	
		CREDITS \$0.00
		TOTAL ACTIVITY \$60.00

	\$2,366.25
	\$0.00
	\$2,366.25
lts	-\$2,366.25
ie	\$0.00



Sunset Hill Stoneware, LLC.

1416 S. Commercial Street
Neenah, WI 54956
1-800-509-4662
Fax#: 920-886-1116

Invoice

Date	Invoice #
8/14/2015	21979

Bill To	Ship To
WI DOJ Training and Standards Attn: Shelly Sandry 17 W Main St Madison, WI 53703	

S.O. No.	P.O. No.	Terms	Due Date	Rep
2006-14905		100% down	8/19/2015	SS

Item	Description	Ordered	Invoiced	Rate	Amount
CM-12 Artwork	Wide Mouth - Sandstorm Artwork Setup	175 1	175 1	12.75 75.00	2,231.25 75.00
Boxes	Custom Packaging and Handling		15	4.00	60.00

	Subtotal	\$2,366.25
Decorate and buy handcrafted stoneware online at www.shstoneware.com .	Sales Tax	\$0.00
	Total	\$2,366.25
	Payments/Credits	-\$2,366.25
	Balance Due	\$0.00

Payment Receipt

Sunset Hill Stoneware, LLC.

Neenah, WI 54956

1-800-509-4662

Fax: 920-882-8726

Received From:

WI DOJ Training and Standards

WI DOJ Training and Standards

Attn: Shelly Sandry

17 W Main St

Madison, WI 53703

Date Received 08/14/2015

Payment Amount \$60.00

Payment Method EFT

Check/Ref. No. [REDACTED]

Invoices Paid

Date	Number	Amount Applied
08/14/2015	21979	-\$60.00

PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll) Andrea E. Waters	For Statement Date: 9-11-15
Purchasing Card Number (last 4 digits only): [REDACTED] 611F-348	

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased. For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory Number for items is \$5,000 or less
8/29/15	Crowne Plaza, Madison	Tax credit for Bethany Robinson's reservation				(\$23.78)	✓
8/27/15	Crowne Plaza, Madison	Lodging for Judge Metropulos		1	\$82.00	\$82.00	✓
8/27/15	Crowne Plaza, Madison	Lodging for Elizabeth Pohlman McQuillen		1	\$82.00	\$82.00	✓
8/28/15	Crowne Plaza, Madison	Lodging for Judge Stark		2	\$82.00	\$164.00	✓
8/28/15	Crowne Plaza, Madison	Lodging for Bethany Robinson (credited in line 1)		2	\$93.89	\$187.78	✓
8/28/15	Crowne Plaza, Madison	Lodging for Kristin Schier		2	\$82.00	\$164.00	✓
8/28/15	Crowne Plaza, Madison	Lodging for Carol Carlson		2	\$82.00	\$164.00	✓
8/28/15	Crowne Plaza, Madison	Lodging for Patrick Isenberger		1	\$82.00	\$82.00	✓
8/28/15	Crowne Plaza, Madison	Lodging for Patrick Isenberger	(on same receipt as item in line above)	1	\$82.00	\$82.00	✓
7/16/15	Crowne Plaza, Madison	Lodging for Carol Carlson at July Curriculum Devel. Mtg		1	\$82.00	\$82.00	✓
8/28/15	Crowne Plaza, Madison	Tax charge for Elizabeth Pohlman McQuillen's lodging, refund noted on her receipt from line 3				\$11.89	✓
9/9/15	Walgreens, Madison, WI	Candy and dry erasers for Treatment Court Standards Training				\$16.77	✓
9/10/15	Doubletree Hotel, Madison, WI	Emergency battery purchase for Treatment Court Standards Training				\$4.00	✓

CARD TOTAL \$1,098.66 ✓

JP Done - 11/18/15
Jan

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

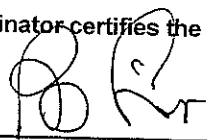

Cardholder

9/22/15
Date


Supervisor

9/22/15
Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.


Div/Bureau P-Card Coordinator

9/29/15
Date

Upon receipt of your US Bank statement, the purchasing card log must be completed for that statement period. Cardholder is responsible to obtain a receipt for all purchases and credits.

Instructions to complete Purchasing Card Log

1. Complete your name and the last four (4) digits of your card at the top left section of the form.
2. Complete the statement date in the top right section of the form as listed on your US Bank statement.
3. List all purchases that have been charged to your purchasing card during this statement period. This includes:
 - The transaction date.
 - The name of the vendor.
 - A description of the item purchased.
 - If the purchase was for travel, i.e. hotel costs, provide the purpose of the trip.
 - Include the travel dates, number of lodging nights, room rate.
4. All items listed on this log should include the total cost.
5. If any item requires to be inventoried, provide the assigned inventory number in the last column and on the same line as the purchased item.
6. Attach all receipts to the back of the log in order of occurrence.
7. As the cardholder, sign and date the purchasing card log.
8. Route the log to your supervisor for signature and date.
9. Obtain the division or bureau p-card coordinator approval.
10. Completed log along with all receipts and appropriate signature shall be routed to the Division of Management Services for final auditing and file retention.



U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

RECEIVED

SEP 21 2015

WISCONSIN DEPT OF JUSTICE
TRAINING & STANDARDS BUREAU

ST OF WI - DOJ

ACCOUNT NUMBER

STATEMENT DATE

09-11-15

TOTAL ACTIVITY

\$ 1,098.66

000003143 1 AV 0.391 106481190856609 P

ANDREA E. WATERS
TAX
DEPARTMENT OF JUSTICE-TS
17 W MAIN ST 8TH FLR
MADISON WI 53703-3960

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT

Cardholder

Signature _____ Date _____

Approver

Signature _____ Date _____

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
08-31	08-29	CROWNE PLAZA MADISON MADISON WI 378144 ARRIVAL: 08-29-15	74692165241000839688098	3750	23.78CR
08-31	08-27	CROWNE PLAZA MADISON MADISON WI 601238 ARRIVAL: 08-27-15	24692165240000323602429	3750	82.00 ✓
08-31	08-27	CROWNE PLAZA MADISON MADISON WI 603950 ARRIVAL: 08-27-15	24692165240000323602437	3750	82.00 ✓
08-31	08-28	CROWNE PLAZA MADISON MADISON WI 601237 ARRIVAL: 08-25-15	24692165241000839687822	3750	164.00 ✓
08-31	08-28	CROWNE PLAZA MADISON MADISON WI 603944 ARRIVAL: 08-26-15	24692165241000839688028	3750	187.78 ✓
08-31	08-28	CROWNE PLAZA MADISON MADISON WI 603943 ARRIVAL: 08-26-15	24692165241000839688036	3750	164.00 ✓
08-31	08-28	CROWNE PLAZA MADISON MADISON WI 603942 ARRIVAL: 08-26-15	24692165241000839688044	3750	164.00 ✓
08-31	08-28	CROWNE PLAZA MADISON MADISON WI 603941 ARRIVAL: 08-26-15	24692165241000839688051	3750	82.00 ✓
08-31	08-28	CROWNE PLAZA MADISON MADISON WI 603941 ARRIVAL: 08-26-15	24692165241000839688069	3750	82.00 ✓

Default Accounting Code: 455TS TS026

CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER		ACCOUNT SUMMARY	
	STATEMENT DATE	DISPUTED AMOUNT		
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	09-11-15	\$.00	PREVIOUS BALANCE	\$.00
			PURCHASES & OTHER CHARGES	\$1,122.44
			CASH ADVANCES	\$.00
			CASH ADVANCE FEE	\$.00
			CREDITS	\$23.78
		AMOUNT DUE \$ 0.00 DO NOT REMIT	TOTAL ACTIVITY	\$1,098.66

Please remember to:

- Enclose your check or money order, payable in U.S. dollars, with this payment coupon, but do not staple or tape them together.
- Write your account number on the front of your check or money order.
- Make checks payable to: Corporate Payment Systems
P.O. Box 790428
St. Louis, MO 63179-0428

Please enter new address or telephone number here:

Name

Address

City

State

Zip

()
Home Phone

()
Business Phone

CUSTOMER SERVICE 1-800-344-5696

Our Customer Service Representatives are available 24 hours a day, 365 days a year. If you have questions about your Commercial Card account, please call Corporate Payment Systems at 1-800-344-5696 or write to us at Corporate Payment Systems, P.O. Box 6343, Fargo, ND 58125-6343.

MAKING PAYMENTS

The amount shown as Amount Due is payable in full upon delivery of this billing statement.

If an employer is making payment for individual employee cardholders, the employer must provide a single check, or other payment acceptable to Corporate Payment Systems, covering all Amounts Due, as well as a list of account numbers and the dollar amount to be credited to each account.

If individual employee cardholders are responsible for payment, a check, or other payment acceptable to Corporate Payment Systems, for the Amount Due together with the top portion of this billing statement must be mailed by the individual employee to Corporate Payment Systems, P.O. Box 790428, St. Louis, MO 63179-0428.

A payment of less than the Amount Due, but intended to settle an account in full, must be mailed to Corporate Payment Systems, P.O. Box 790428, St. Louis, MO 63179-0428. Accepting a partial payment will not change any agreement between either the individual employee cardholder or the employer and Corporate Payment Systems in any way.

Use the enclosed envelope to mail your payment to Corporate Payment Systems, P.O. Box 790428, St. Louis, MO 63179-0428. All payments by check or money order and accompanied by a payment coupon will be credited to your account on the day of receipt if received at this address by 1:00 p.m. on any banking day. Banking days are all calendar days except Saturday, Sunday and federal holidays. Other payments will be credited to your account within five days of receipt by Corporate Payment Systems.

LOST OR STOLEN CARDS

If a Card is lost or stolen, the individual employee cardholder must call Corporate Payment Systems immediately at 1-800-344-5696 and notify the employer in accordance with the employer's policies and/or instructions.

BILLING INQUIRIES

Before disputing or questioning a charge on your statement, take the following actions:

- Determine if other employees of the corporation / institution may have participated in the transaction.
- Review your receipts for the amount in question as it may have posted to your statement with a different merchant name.
- Attempt to contact the merchant to resolve the issue.

To dispute the transaction, phone Corporate Payment Systems Customer Service at the telephone number on the front of this statement and have the following information available:

- The date and dollar amount of the transaction you are questioning.
- An explanation of why you believe there is an error along with any documentation you may have to support your claim.
- The date you contacted the merchant to attempt to resolve this issue and the merchant's response.

Many inquiries can be corrected over the phone, but phoning alone does not preserve your rights. To preserve your rights, we must receive your written communication no later than 60 days after we sent you the first bill on which the error or problem appeared. Please send a letter with your name, account number and the above information to: CORPORATE PAYMENT SYSTEMS, P.O. BOX 6335, FARGO, ND 58125-6335. You do not have to pay the amount of the charge that is in dispute while we are investigating; however, you are obligated to pay any charges that are not in question. While we investigate your dispute, we cannot report you as delinquent or take any action to collect the amount you question.



Account Name:	ANDREA E WATERS
Company Name:	ST OF WI - DOJ
Account Number:	[REDACTED]
Statement Date:	09-11-15

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
09-04	07-16	CROWNE PLAZA MADISON MADISON WI 600986 ARRIVAL: 07-15-15	24692165246000294167125	3750	82.00
09-07	08-28	CROWNE PLAZA MADISON MADISON WI 603950 ARRIVAL: 08-27-15	24692165247000847447072	3750	11.89
09-10	09-09	WALGREENS #6130 MADISON WI PUR ID: 00000000000000000000 TAX: 0.00	24445005253600172750948	5912	16.77
09-11	09-10	DOUBLETREE HOTEL MADISON MADISON WI 00003771 ARRIVAL: 09-10-15	24755425253732539888352	3504	4.00

Please remember to:

- Enclose your check or money order, payable in U.S. dollars, with this payment coupon, but do not staple or tape them together.
- Write your account number on the front of your check or money order.
- Make checks payable to: Corporate Payment Systems
P.O. Box 790428
St. Louis, MO 63179-0428

Please enter new address or telephone number here:

Name

Address

City

State

Zip

()
Home Phone

()
Business Phone

CUSTOMER SERVICE 1-800-344-5696

Our Customer Service Representatives are available 24 hours a day, 365 days a year. If you have questions about your Commercial Card account, please call Corporate Payment Systems at 1-800-344-5696 or write to us at Corporate Payment Systems, P.O. Box 6343, Fargo, ND 58125-6343.

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If individual employee cardholders are responsible for payment, a check, or other payment acceptable to Corporate Payment Systems, for the Amount Due together with the top portion of this billing statement must be mailed by the individual employee to Corporate Payment Systems, P.O. Box 790428, St. Louis, MO 63179-0428.

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Use the enclosed envelope to mail your payment to Corporate Payment Systems, P.O. Box 790428, St. Louis, MO 63179-0428. All payments by check or money order and accompanied by a payment coupon will be credited to your account on the day of receipt if received at this address by 1:00 p.m. on any banking day. Banking days are all calendar days except Saturday, Sunday and federal holidays. Other payments will be credited to your account within five days of receipt by Corporate Payment Systems.

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- Attempt to contact the merchant to resolve the issue.

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- The date and dollar amount of the transaction you are questioning.
- An explanation of why you believe there is an error along with any documentation you may have to support your claim.
- The date you contacted the merchant to attempt to resolve this issue and the merchant's response.

Many Inquiries can be corrected over the phone, but phoning alone does not preserve your rights. To preserve your rights, we must receive your written communication no later than 60 days after we sent you the first bill on which the error or problem appeared. Please send a letter with your name, account number and the above information to: CORPORATE PAYMENT SYSTEMS, P.O. BOX 6335, FARGO, ND 58125-6335. You do not have to pay the amount of the charge that is in dispute while we are investigating; however, you are obligated to pay any charges that are not in question. While we investigate your dispute, we cannot report you as delinquent or take any action to collect the amount you question.

BUSINESS EVENT AUTHORIZATION

(This form must be completed for every business event which will have costs paid by DOJ.)

Name and Purpose of Event: Wisconsin Treatment Court Standards Training Curriculum Development Meeting

Dates/Times: 8/26/15-8/28/15 8:00am-4:30

City: Madison, WI

Sponsoring Division/Bureau: Training and Standards

Coordinator: Andrea Waters

Estimated # of Attendees: State Employees (* See below): 5

Non-State Employees: 15

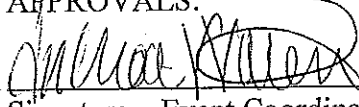
Bureau Staff Attending: Matt Raymer, Reneé Lushaj, Andrea Waters

1. Justification for site selection: This must be provided if the location of the event will not a state government or university facility when more than 50% of attendees will be state employees.

2. Justification for Food Costs: Meals and break items, including service fees, must always be at state rates. Justification must be provided if these costs will exceed state maximums. Additionally, if more than 50% of attendees will be state employees headquartered in the business event city, justification must be provided for any food costs.

3. Giveaways: If items are to be purchased by DOJ and given to event attendees provide a description of the item, the dollar value of the item, the anticipated total cost, and the name of the vendor from whom the items will be purchased.

APPROVALS:


Signature – Event Coordinator

9/2/15
Date

Signature – Supervisor

Date

* If more than 50% of attendees will be state employees and costs will be incurred, approval of the Administrator, Division of Management Services, must be given prior to the business event.

Signature – Administrator, DMS

Date

WI Treatment Court Standards Training – Curriculum Development Team Meeting

August 26-28, 2015

1. Judge Elliott Levine
2. Judge Lisa Stark
3. Judge John Markson
4. Judge Mitch Metropulos
5. Bethany Robinson
6. Katie Behl
7. Carol Carlson
8. Elizabeth Pohlman McQuillen
9. Patrick Isenberger
10. Kristin Schier
11. Judge Ellen Brostrom
12. Jared Hoy
13. Matthew Raymer
14. Sabrina Gentile
15. Tommy Gubbin
16. Connie Kostelac
17. Erika Schoot
18. Alesha Brown
19. Reneé Lushaj
20. Andrea Waters



CROWNE PLAZA®

MADISON

22

08-28-15

Mitch Metropulos United States	Folio No.	: 404126	Room No.	: 529
	A/R Number	:	Arrival	: 08-27-15
	Group Code	:	Departure	: 08-28-15
	Company	:	Conf. No.	: 64429575
	Membership No.	:	Rate Code	: IMSTI
	Invoice No.	:	Page No.	: 1 of 1

Date	Description	Charges	Credits
08-27-15	Deposit Transfer at Check-In		82.00
08-27-15	*Accommodation	82.00	
Total		82.00	82.00
Balance		0.00	

Guest Signature: _____

I have received the goods and / or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.



CROWNE PLAZA®

MADISON

100

09-22-15

Elizabeth Pohlman McQuillen United States	Folio No. : 404105 A/R Number : Group Code : Company : Membership No. : Invoice No. :	Room No. : 429 Arrival : 08-27-15 Departure : 09-22-15 Conf. No. : 68648852 Rate Code : IMSTI Page No. : 1 of 1
--	--	--

Date	Description	Charges	Credits
08-27-15	Deposit Transfer at Check-In		82.00
08-27-15	*Accommodation	82.00	
09-03-15	Accommodation Tax-Adj	11.89	
	no te forms found		
09-03-15	Visa [REDACTED]		11.89
09-22-15	Accommodation Tax-Adj	-11.89	
09-22-15	Visa [REDACTED] TE-DOJ		-11.89
Total		82.00	82.00
Balance		0.00	

Guest Signature: _____

I have received the goods and / or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.



CROWNE PLAZA®

MADISON

22

08-28-15

Lisa Stark United States	Folio No.	: 404113	Room No.	: 308
	A/R Number	:	Arrival	: 08-25-15
	Group Code	:	Departure	: 08-28-15
	Company	:	Conf. No.	: 64429062
	Membership No.	:	Rate Code	: IMSTI
	Invoice No.	:	Page No.	: 1 of 1

Date	Description	Charges	Credits
08-26-15	*Accommodation	82.00	
08-27-15	*Accommodation	82.00	
08-28-15	Visa [REDACTED]		164.00
Total		164.00	164.00
Balance		0.00	

Guest Signature: _____

I have received the goods and / or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.



CROWNE PLAZA®

MADISON

22

08-28-15

Bethany Robinson
United States

Folio No. : 404108
A/R Number :
Group Code :
Company :
Membership No. :
Invoice No. :

Room No. : 527
Arrival : 08-26-15
Departure : 08-28-15
Conf. No. : 68640123
Rate Code : IMSTI
Page No. : 1 of 1

Date	Description	Charges	Credits
08-26-15	*Accommodation	82.00	
08-26-15	Accommodation Tax	11.89	
08-27-15	*Accommodation	82.00	
08-27-15	Accommodation Tax	11.89	
08-28-15	Visa [REDACTED]		187.78
08-28-15	Accommodation Tax-Adj [REDACTED]	-23.78	
	DEPT OF JUSTICE		
08-28-15	Visa [REDACTED]		-23.78
	VOID...CORRECTION		
Total		164.00	164.00
Balance		0.00	

Guest Signature: _____

I have received the goods and / or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.



CROWNE PLAZA®

MADISON

4

08-28-15

Kristin Schier
Glen Haven WI 53810
United States

Folio No. :
A/R Number :
Group Code :
Company :
Membership No. :
Invoice No. :

Room No. : 444
Arrival : 08-26-15
Departure : 08-28-15
Conf. No. : 68640092
Rate Code : IMSTI
Page No. : 1 of 1

Date	Description	Charges	Credits
08-26-15	*Accommodation	82.00	
08-26-15	Accommodation Tax	11.89	
08-27-15	*Accommodation	82.00	
08-27-15	Accommodation Tax	11.89	
08-28-15	Accommodation Tax-Adj	-23.78	
	DOJ TE		
08-28-15	Visa [REDACTED]		164.00
Total		164.00	164.00
Balance		0.00	

Guest Signature: _____

I have received the goods and / or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.



CROWNE PLAZA®

MADISON

22

08-28-15

Carol Carlson 3005 Jenny Jae Lane Crystal Lake IL 60012 United States	Folio No. :	404106	Room No. :	237
	A/R Number :		Arrival :	08-26-15
	Group Code :		Departure :	08-28-15
	Company :		Conf. No. :	68640072
	Membership No. :		Rate Code :	IMSTI
	Invoice No. :		Page No. :	1 of 1

Date	Description	Charges	Credits
08-26-15	*Accommodation	82.00	
08-26-15	Accommodation Tax	11.89	
08-27-15	*Accommodation	82.00	
08-27-15	Accommodation Tax	11.89	
08-28-15	Accommodation Tax-Adj	-11.89	
	TE DOJ		
08-28-15	Visa [REDACTED]		82.00
08-28-15	Visa [REDACTED]		82.00
08-28-15	Accommodation Tax-Adj	-11.89	
Total		164.00	164.00
Balance		0.00	

Guest Signature: _____

I have received the goods and / or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.



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MADISON

4

08-28-15

Patrick Isenberger
745 Irvine st
Chippewa Falls WI 54729
United States

Folio No. :
A/R Number :
Group Code :
Company :
Membership No. :
Invoice No. :

Room No. : 346
Arrival : 08-26-15
Departure : 08-28-15
Conf. No. : 68640109
Rate Code : IMSTI
Page No. : 1 of 1

Date	Description	Charges	Credits
08-26-15	*Accommodation	82.00	
08-26-15	Accommodation Tax	11.89	
08-27-15	*Accommodation	82.00	
08-27-15	Accommodation Tax	11.89	
08-28-15	Accommodation Tax-Adj	-23.78	
	DOJ		
08-28-15	Visa		164.00
Total		164.00	164.00
Balance		0.00	

Guest Signature: _____

I have received the goods and / or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

BUSINESS EVENT AUTHORIZATION

(This form must be completed for every business event which will have costs paid by DOJ.)

Name and Purpose of Event: Treatment Court Standards Curriculum Development Mtg.Dates/Times: 7/15/15 - 7/16/15 ^{8:30-4:30}_{8:00-1:00} City: MadisonSponsoring Division/Bureau: Training Standards Coordinator: Renee LushajEstimated # of Attendees: State Employees (* See below): 7Non-State Employees: 15Bureau Staff Attending: Renee Lushaj, Matt Raymer, Andrea
Waters,

1. **Justification for site selection:** This must be provided if the location of the event will not a state government or university facility when more than 50% of attendees will be state employees.

2. **Justification for Food Costs:** Meals and break items, including service fees, must always be at state rates. Justification must be provided if these costs will exceed state maximums. Additionally, if more than 50% of attendees will be state employees headquartered in the business event city, justification must be provided for any food costs.

3. **Giveaways:** If items are to be purchased by DOJ and given to event attendees provide a description of the item, the dollar value of the item, the anticipated total cost, and the name of the vendor from whom the items will be purchased.

APPROVALS:

Renee Lushaj
Signature - Event Coordinator7/14/15
Date[Signature]
Signature - Supervisor7/14/15
Date

* If more than 50% of attendees will be state employees and costs will be incurred, approval of the Administrator, Division of Management Services, must be given prior to the business event.

Signature - Administrator, DMS_____
Date

**WISCONSIN TREATMENT COURT STANDARDS CURRICULUM
DEVELOPMENT MEETING**[illegible]



CROWNE PLAZA®

MADISON

2

09-02-15

Carol Carlson	Folio No. : 398945	Room No. : 308
3005 Jenny Jae Lane	A/R Number :	Arrival : 07-15-15
Crystal Lake IL 60012	Group Code :	Departure : 09-02-15
United States	Company :	Conf. No. : 61662144
	Membership No. :	Rate Code : IMSTI
	Invoice No. :	Page No. : 1 of 1

Date	Description	Charges	Credits
07-15-15	*Accommodation	82.00	
07-15-15	Accommodation Tax	11.89	
09-02-15	Accommodation Tax-Adj	-11.89	
09-02-15	Visa [REDACTED]		82.00
Total		82.00	82.00
Balance		0.00	

Guest Signature: _____

I have received the goods and / or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

BUSINESS EVENT AUTHORIZATION

(This form must be completed for every business event which will have costs paid by DOJ.)

Name and Purpose of Event: Wisconsin Treatment Court Standards Training

Dates/Times: 9/9/15 1:00am-5:00pm 9/10/15 8:00am-4:30pm 9/11/15 8:00am-4:30pm

City: Madison, WI

Sponsoring Division/Bureau: Training and Standards

Coordinator: Reneé Lushaj

Estimated # of Attendees: State Employees (* See below): 10

Non-State Employees: 100

Bureau Staff Attending: Matt Raymer, Reneé Lushaj, Andrea Waters

1. Justification for site selection: This must be provided if the location of the event will not a state government or university facility when more than 50% of attendees will be state employees.

2. Justification for Food Costs: Meals and break items, including service fees, must always be at state rates. Justification must be provided if these costs will exceed state maximums. Additionally, if more than 50% of attendees will be state employees headquartered in the business event city, justification must be provided for any food costs. We will be providing water and coffee to the attendees and charging the cost to 232-555P.

3. Giveaways: If items are to be purchased by DOJ and given to event attendees provide a description of the item, the dollar value of the item, the anticipated total cost, and the name of the vendor from whom the items will be purchased.

APPROVALS:

Reneé Lushaj
Signature – Event Coordinator

9/2/15
Date

Stacy Re
Signature – Supervisor

9/3/15
Date

* If more than 50% of attendees will be state employees and costs will be incurred, approval of the Administrator, Division of Management Services, must be given prior to the business event.

Signature – Administrator, DMS

Date

Day 1

Credits

1 of 11


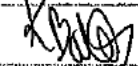
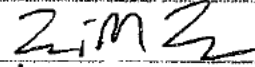

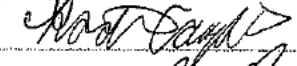

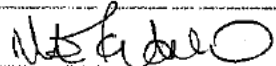

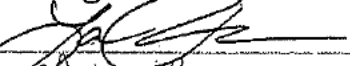
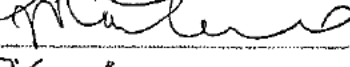
Day 1

Madison Treatment Court Standards Training Sign-In

Wednesday, September 9, 2015

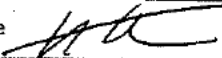
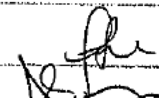

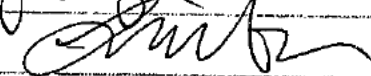
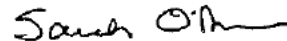
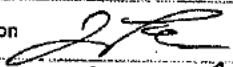

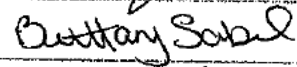
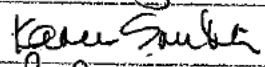
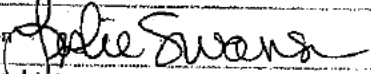
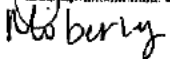
Dane County

Credits

Name	Signature	Email	Correct?	Corrected Email	Judicial	Legal	Social Work	Law Enforcement
Matt Allord		Matthew.Allord@Wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Kathleen Baldukas		kathleen.baldukas@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brian Basham		Brian.Basham@Wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Stefanie Brown		sbrown@arccommserve.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Todd Campbell		campbell.todd@countyofdane.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Juan Colas		juan.colas@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
James Crawford			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* Mike Ekedahl		Michael.Ekedahl@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Troy Enger		Troy.Enger@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kelly Fisher		fisher.kelly@countyofdane.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lauren Franson		Lauren.Franson@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maria Guerrero		maria.guerreroruvalcaba@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shawn O'Connell		shawn.o'connell@da.wi.gov				X		
Adam Welch		welch@opd.wi.gov				X		
Richard Bryant		rbryant@gccmadison.com						X



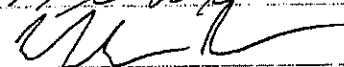
Madison Treatment Court Standards Training Sign-In
Wednesday, September 9, 2015

Dane County Continued

Name	Signature	Email	Correct?	Corrected Email	Credits			
					Judicial	Legal	Social Work	Law Enforcement
Adam Hasse		Adam.Hasse@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lora Hudson		lora.hudson@journeymhc.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Joselyn Lopez		Joselyn.Lopez@Wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
John Maloney		John.Maloney@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lucy Milani		lucy.milani@journeymhc.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sue Moran		sue.moran@journeymhc.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sarah O'Brien			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jim Pearson		james.pearson@journeymhc.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Rhoda Ricciardi		Rhoda.Ricciardi@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brittany Sabel		brittany.sabel@journeymhc.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Karen Smith		karen.smith@journeymhc.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Leslie Swanson		leslie.swanson@journeymhc.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leann Mobley		leann.mobley@wi.gov						

Madison Treatment Court Standards Training Sign-In Wednesday, September 9, 2015

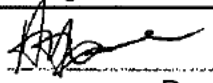
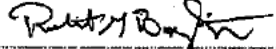

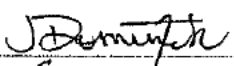


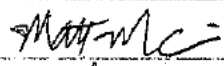
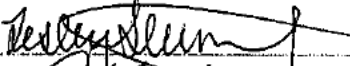

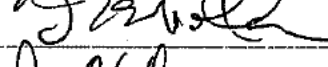
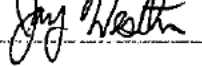
Dane County Continued

Name	Signature	Email	Correct?	Corrected Email	Credits			
					Judicial	Legal	Social Work	Law Enforcement
Emily Thompson		Emily.Thompson@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DeeDee Watson		watsondd@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maggie Wienkes		Margaret.Wienkes@Wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Edward Zapala		edward.Zapala@va.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
DAVE FLANAGAN		DAVID.FLANAGAN@WICOURTS.GOV			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Madison Treatment Court Standards Training Sign-In
Wednesday, September 9, 2015

Dodge County

Day 1

Name	Signature	Email	Correct?	Corrected Email	Credits			
					Judicial	Legal	Social Work	Law Enforcement
Adayta Axelson		aaxelson@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bob Barrington		Bob.Barrington@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Andrew Bissonnette		[REDACTED]	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jennifer Dominik		jdominik@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Craig Holler		choller@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kim Kunz		kkunz@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Matthew Marvin		mmarvin@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lesley Steinmetz		lsteinmetz@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
John Storck		John.Storck@wi.courts.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Greg Volland		volland@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jay Westhuis		jwesthuis@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Madison Treatment Court Standards Training Sign-In
Wednesday, September 9, 2015

Grant County

Day 1

Name	Signature	Email	Correct?	Corrected Email	Credits			
					Judicial	Legal	Social Work	Law Enforcement
Craig Day	<i>[Signature]</i>	craig.day@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chasity Fitzgerald	<i>[Signature]</i>	chasityr.fitzgerald@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jack Johnson	<i>[Signature]</i>	jjohnson@co.grant.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Kyle Reiman	<i>[Signature]</i>	olivetor@opd.wi.gov	<input type="checkbox"/>	reimann@opd.wi.gov	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lisa Riniker	<i>[Signature]</i>	Lisa.Riniker@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kristin Schier	<i>[Signature]</i>	kschier@co.grant.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Megan Wolf	<i>[Signature]</i>	MWolf@unifiedservices.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Madison Treatment Court Standards Training Sign-In
Wednesday, September 9, 2015

Day 1

Iowa County


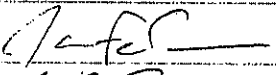
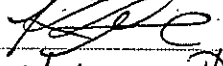
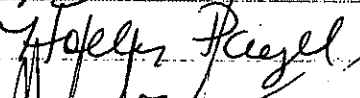

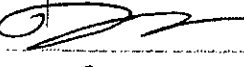
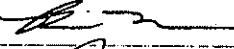
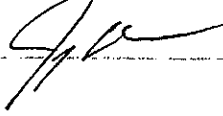
Credits

Name	Signature	Email	Correct?	Corrected Email	Judicial	Legal	Social Work	Law Enforcement
Ashley Barman	<i>Ashley Barman</i>	ashley.barman@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lisa McDougal	<i>Lisa McDougal</i>	mcdougall@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Michael Peterson	<i>Michael Peterson</i>	mike.peterson@iowacounty.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Bruce Dyke	<i>Bruce Dyke</i>	b.dyke@iowacounty.org	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Matt Allen	<i>Matt Allen</i>	matthew.allen@iowacounty.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Madison Treatment Court Standards Training Sign-In
Wednesday, September 9, 2015

Jefferson County

Day 1


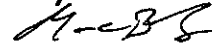
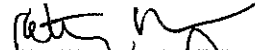
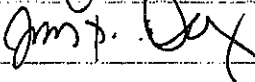



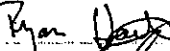

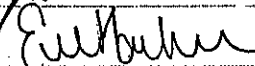
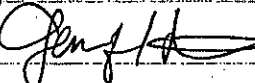
Name	Signature	Email	Correct?	Corrected Email	Credits			
					Judicial	Legal	Social Work	Law Enforcement
Kathi Cauley		kathic@jeffersoncountywi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Jeff De La Rosa		delarosaj@opd.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
James Feldman		jfeldman@wiscs.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kristy Gusse		kgusse@wiscs.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Holly Pagel		hollyp@jeffersoncountywi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Maia Riesebieter		mriesebieter@wiscs.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
David Wambach		David.Wambach@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ben Wehmeier		benjaminw@jeffersoncountywi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jennifer Weston		Jennifer.Weston@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Day 1

Madison Treatment Court Standards Training Sign-In Wednesday, September 9, 2015



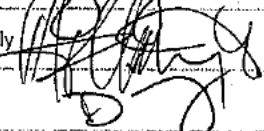
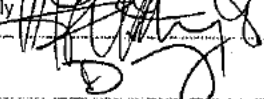
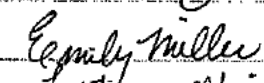
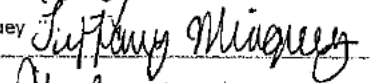
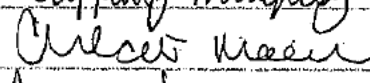
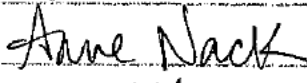
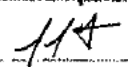
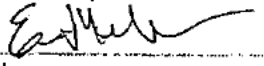
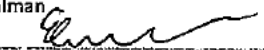

Rock County

Credits

Name	Signature	Email	Correct?	Corrected Email	Judicial	Legal	Social Work	Law Enforcement
0 Alan Bates		Alan.Bates@wicourts.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
✓ Mason Braunschweig		Mason.Braunschweig@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
▷ Katharine Buker		Kate.Buker@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
✓ James Daley		James.Daley@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
✓ Sean Drury		drury@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
✓ David DuPree		dpdupree959@yahoo.com	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
00V Paul Gregory		gregoryp@uww.edu	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0 Michael Haakenson		Michael.Haakenson@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0 Ryan Hartwig		Ryan.Hartwig@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0 Brad Hawbecker		hawbecker@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
0 Erin Hawkinson		Erin.Hawkinson@wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
▷ Jennifer Hendrickson		hendricj@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

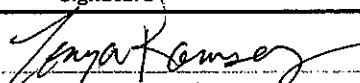
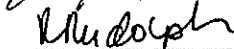
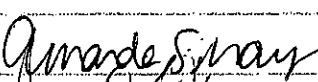
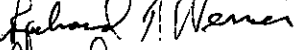


Madison Treatment Court Standards Training Sign-In
Wednesday, September 9, 2015

Rock County Continued

	Name	Signature	Email	Correct?	Corrected Email	Credits			
						Judicial	Legal	Social Work	Law Enforcement
✓	Jamil S Khan			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
★	Sarah Krahn		sarah.krahn@wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
▷	Sara Leidholdt		Sara.Leidholdt@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
▷	Kelly Mattingly		mattinglyk@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
✓	David Melby		David.Melby@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
▷ ✓	Emily Miller		millere@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
▷	Tiffany Minguet		LeyT@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
▷	Chloe Moore		chloe.moore@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
○	Anne Nack		Anne.Nack@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
○	Jim Neitzel		Louis.Neitzel@wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
○	Eric Nelson		nelson@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
○	Elizabeth Pohlman		pohlman@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
○	McQuillen			<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Madison Treatment Court Standards Training Sign-In
Wednesday, September 9, 2015

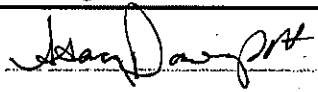
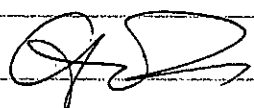
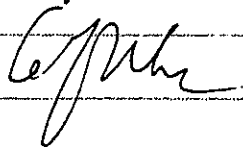
Rock County Continued

Name	Signature	Email	Correct?	Corrected Email	Credits			
					Judicial	Legal	Social Work	Law Enforcement
○ Tonya Ramsey		ramsey@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
DO Rebecca Rudolph		rudolphr@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
✓ Stephanie Bloedorn		stephanie.bloedorn@va.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
▷ Amanda Suarez		suarez@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
✗ Richard Werner		richard.werner@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
▷ Cheniqua White		cheniqua.white@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D Jay Williams		williamj@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Madison Treatment Court Standards Training Sign-In
Thursday, September 10, 2015

Day 2

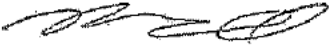
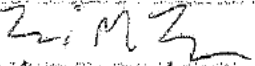
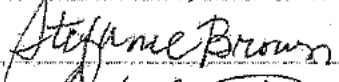



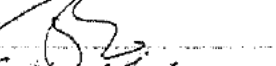
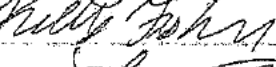
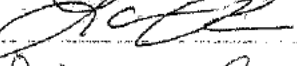

Columbia County

Name	Signature	Email	Correct?	Corrected Email	Credits			
					Judicial	Legal	Social Work	Law Enforcement
Stacy Davenport		stacy.davenport@co.columbia.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Scott Gordon		Scott.Gordon@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Amanda Riek		rieka@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sarah Wescott		Sarah.Wescott@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alan White		Alan.white@wicourts.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kelly Zuelke		kelly.zuelke@co.columbia.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Madison Treatment Court Standards Training Sign-In
Thursday, September 10, 2015

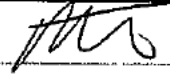

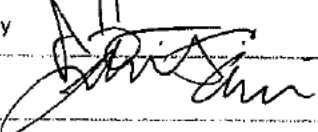
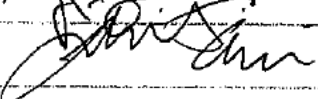
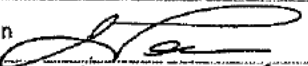

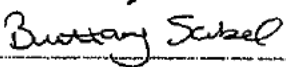

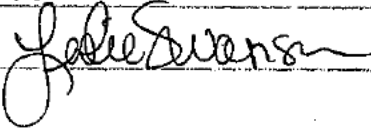
Days

Dane County

Name	Signature	Email	Correct?	Corrected Email	Judicial	Credits		
						Legal	Social Work	Law Enforcement
Matt Allord		Matthew.Allord@Wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Kathleen Baldukas		kathleen.baldukas@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brian Basham		Brian.Basham@Wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Stefanie Brown		sbrown@arccommserve.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Todd Campbell		campbell.todd@countyofdane.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Juan Colas		juan.colas@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
James Crawford			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mike Ekedahl		Michael.Ekedahl@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Troy Enger		Troy.Enger@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kelly Fisher		fisher.kelly@countyofdane.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lauren Franson		Lauren.Franson@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maria Guerrero		maria.guerrerovalcaba@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Richard Bryant		rbryant@gea.madison.com	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>	

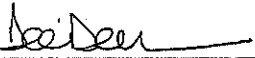
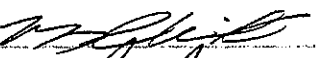
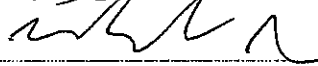

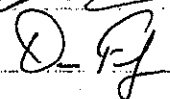
Madison Treatment Court Standards Training Sign-In
Thursday, September 10, 2015

Dane County Continued

Name	Signature	Email	Correct?	Corrected Email	Credits			
					Judicial	Legal	Social Work	Law Enforcement
Adam Hasse		Adam.Hasse@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lora Hudson		lora.hudson@journeymhc.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Joselyn Lopez		Joselyn.Lopez@Wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
John Maloney		John.Maloney@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lucy Milani		lucy.milani@journeymhc.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sue Moran		sue.moran@journeymhc.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sarah O'Brien			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jim Pearson		james.pearson@journeymhc.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Rhoda Ricciardi		Rhoda.Ricciardi@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brittany Sabel		brittany.sabel@journeymhc.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Karen Smith		karen.smith@journeymhc.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leslie Swanson		leslie.swanson@journeymhc.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Madison Treatment Court Standards Training Sign-In
Thursday, September 10, 2015

Dane County Continued

Name	Signature	Email	Correct?	Corrected Email	Judicial	Legal	Credits	
							Social Work	Law Enforcement
Emily Thompson		Emily.Thompson@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DeeDee Watson		watsond@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maggie Wienkes		Margaret.Wienkes@Wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Edward Zapala		edward.Zapala@va.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sharon O'Connell		sharon.o'connell@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DAVE FLANAGAN		DAVID.FLANAGAN@WICOURTS.GOV	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Madison Treatment Court Standards Training Sign-In
Thursday, September 10, 2015

Day 2

Dodge County

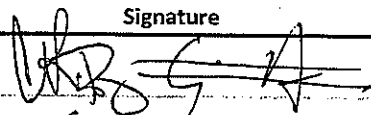
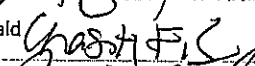
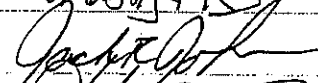
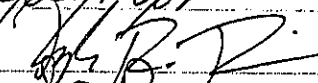

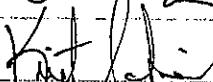
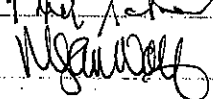
Credits

Name	Signature	Email	Correct?	Corrected Email	Judicial	Legal	Social Work	Law Enforcement
Adayta Axeison	<i>A. Axeison</i>	aaxelson@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bob Barrington	<i>Bob Barrington</i>	Bob.Barrington@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Andrew Bissonnette	<i>Andrew Bissonnette</i>	[REDACTED]	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jennifer Dominik	<i>J. Dominik</i>	jdominik@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Craig Holler	<i>C. Holler</i>	choller@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kim Kunz	<i>Kim Kunz</i>	kkunz@co.dodge.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Matthew Marvin	<i>Matthew Marvin</i>	mmarvin@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lesley Steinmetz	<i>Lesley Steinmetz</i>	lsteinmetz@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
John Storck	<i>John Storck</i>	John.Storck@wi.courts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Greg Vollan	<i>Greg Vollan</i>	vollan@cpd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jay Westhuis	<i>Jay Westhuis</i>	jwesthuis@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Madison Treatment Court Standards Training Sign-In
Thursday, September 10, 2015

Day 2

Grant County

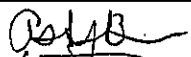

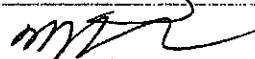
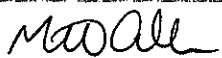

Name	Signature	Email	Correct?	Corrected Email	Credits			
					Judicial	Legal	Social Work	Law Enforcement
Craig Day		craig.day@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chasity Fitzgerald		chasityr.fitzgerald@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jack Johnson		jjohnson@co.grant.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Kyle Reiman		olivator@opd.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lisa Riniker		Lisa.Riniker@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kristin Schier		kschier@co.grant.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Megan Wolf		MWolf@unifiedservices.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Madison Treatment Court Standards Training Sign-In
Thursday, September 10, 2015

Day 2

Iowa County


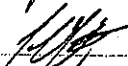
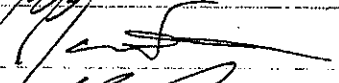
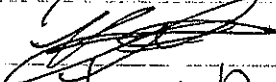


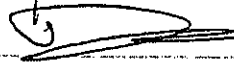
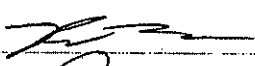

Credits

Name	Signature	Email	Correct?	Corrected Email	Judicial	Legal	Social Work	Law Enforcement
Ashley Barman		ashley.barman@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lisa McDougal		mcdougall@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Michael Peterson		mike.peterson@iowacounty.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Matthew Allen		matthew.allen@iowacounty.org			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bruce Dyke		wdyke@iowacounty.org			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Madison Treatment Court Standards Training Sign-In
Thursday, September 10, 2015

Day 2


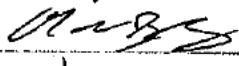
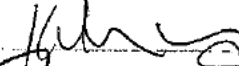
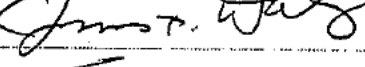
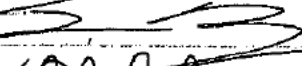
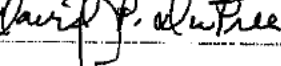
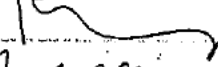
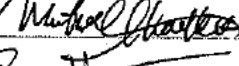



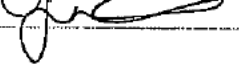
Jefferson County

Name	Signature	Email	Correct?	Corrected Email	Judicial	Legal	Credits	
							Social Work	Law Enforcement
Kathi Cauley		kathic@jeffersoncountywi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jeff De La Rosa		delarosaj@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
James Feldman		jfeldman@wiscs.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kristi Gusse		kgusse@wiscs.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Holly Pagel		hollyp@jeffersoncountywi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maia Riesebieter		mriesebieter@wiscs.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
David Wambach		David.Wambach@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ben Wehmeier		benjaminw@jeffersoncountywi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jennifer Weston		Jennifer.Weston@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Madison Treatment Court Standards Training Sign-In
Thursday, September 10, 2015

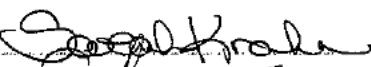
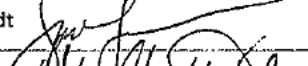
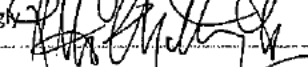
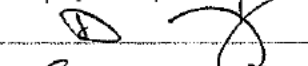
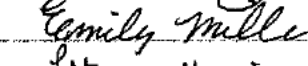

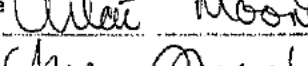
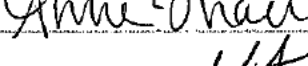
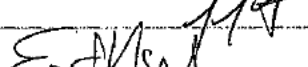
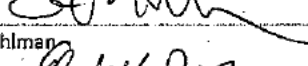

Day 2

Rock County

Name	Signature	Email	Correct?	Corrected Email	Credits			
					Judicial	Legal	Social Work	Law Enforcement
Alan Bates		Alan.Bates@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mason Braunschweig		Mason.Braunschweig@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Katharine Buker		Kate.Buker@da.wi.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
James Daley		James.Daley@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sean Drury		drurys@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
David DuPree		[REDACTED]	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Paul Gregory		gregoryp@uww.edu	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Michael Haakenson		Michael.Haakenson@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ryan Hartwig		Ryan.Hartwig@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brad Hawbecker		hawbecker@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Erin Hawkinson		Erin.Hawkinson@wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jennifer Hendrickson		hendricj@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>


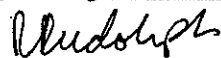
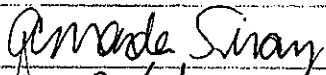
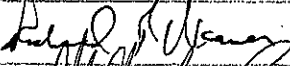
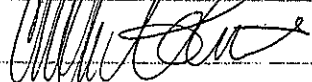
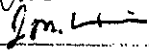
Madison Treatment Court Standards Training Sign-In
Thursday, September 10, 2015

Rock County Continued

Name	Signature	Email	Correct?	Corrected Email	Credits			
					Judicial	Legal	Social Work	Law Enforcement
Jamil S Khan			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sarah Krahn		sarah.krahn@wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sara Leidholdt		Sara.Leidholdt@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kelly Mattingly		mattinglyk@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
David Melby		David.Melby@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emily Miller		millere@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Tiffany Minguay		LeyT@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Chloe Moore		chloe.moore@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anne Nack		Anne.Nack@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jim Neitzel		Louis.Neitzel@wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eric Nelson		nelsone@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Elizabeth Pohlman		pohlman@co.rock.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
McQuillen								

Madison Treatment Court Standards Training Sign-In
Thursday, September 10, 2015

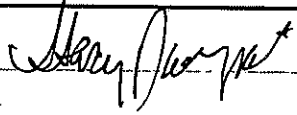
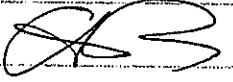

Rock County Continued

Name	Signature	Email	Correct?	Corrected Email	Credits			
					Judicial	Legal	Social Work	Law Enforcement
Tonya Ramsey		ramsey@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Rebecca Rudolph		rudolphr@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Stephanie Bloedorn		stephanie.bloedorn@va.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Amanda Suarez		suarez@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Richard Werner		richard.werner@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cheniqua White		cheniqua.white@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jay Williams		williamj@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Day 3

Madison Treatment Court Standards Training Sign-In Friday, September 11, 2015

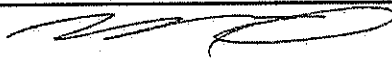
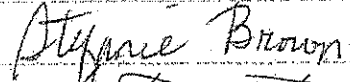
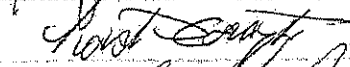
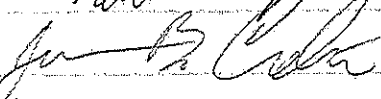

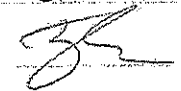
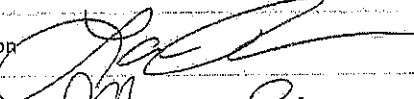
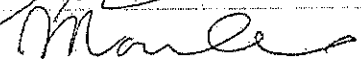
Columbia County

Name	Signature	Email	Correct?	Corrected Email	Credits			
					Judicial	Legal	Social Work	Law Enforcement
Stacy Davenport		stacy.davenport@co.columbia.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Scott Gordon		Scott.Gordon@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Amanda Riek		rieka@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sarah Wescott		Sarah.Wescott@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alan White		Alan.white@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kelly Zuelke		kelly.zuelke@co.columbia.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Madison Treatment Court Standards Training Sign-In
Friday, September 11, 2015




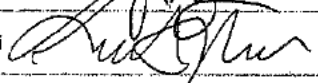
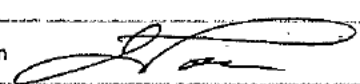

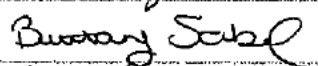

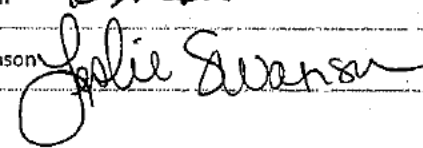
Dane County

Day 3

Name	Signature	Email	Correct?	Corrected Email	Judicial	Legal	Credits	
							Social Work	Law Enforcement
Matt Allord		Matthew.Allord@Wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Kathleen Baldukas		kathleen.baldukas@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brian Basham		Brian.Basham@Wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stefanie Brown		sbrown@arccommserve.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Todd Campbell		campbell.todd@countyofdane.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Juan Colas		juan.colas@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
James Crawford		jrcr.james@yahoo.com	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mike Ekedahl		Michael.Ekedahl@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Troy Enger		Troy.Enger@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kelly Fisher		fisher.kelly@countyofdane.com	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lauren Franson		Lauren.Franson@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maria Guerrero		maria.guerrerovalcaba@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Richard Bryant		rbryant@gecmadison.com	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>



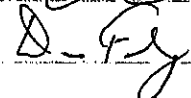
Madison Treatment Court Standards Training Sign-In
Friday, September 11, 2015

Dane County Continued

Name	Signature	Email	Correct?	Corrected Email	Judicial	Legal	Credits	
							Social Work	Law Enforcement
Adam Hasse		Adam.Hasse@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lora Hudson		lora.hudson@journeymhc.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Joselyn Lopez		Joselyn.Lopez@Wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
John Maloney		John.Maloney@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lucy Milani		lucy.milani@journeymhc.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sue Moran		sue.moran@journeymhc.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sarah O'Brien			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jim Pearson		james.pearson@journeymhc.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Rhoda Ricciardi		Rhoda.Ricciardi@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brittany Sabel		brittany.sabel@journeymhc.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Karen Smith		karen.smith@journeymhc.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leslie Swanson		leslie.swanson@journeymhc.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Madison Treatment Court Standards Training Sign-In Friday, September 11, 2015

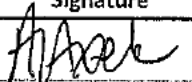
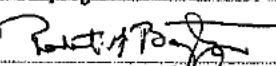
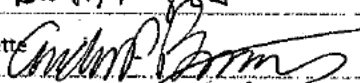
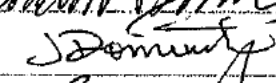
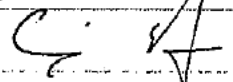
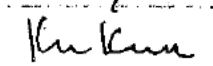
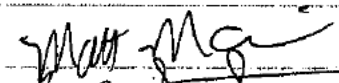
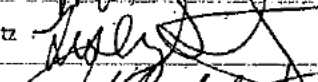
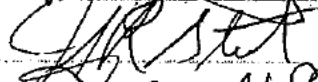
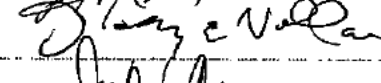
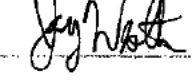
Dane County Continued

Name	Signature	Email	Correct?	Corrected Email	Credits			
					Judicial	Legal	Social Work	Law Enforcement
Emily Thompson		Emily.Thompson@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DeeDee Watson		watsondd@opd.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maggie Wienkes		Margaret.Wienkes@Wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Edward Zapala		edward.Zapala@va.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
DAVE FLANAGAN		DAVID.FLANAGAN@WICOURTS.GOV			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Day 3

Madison Treatment Court Standards Training Sign-In Friday, September 11, 2015

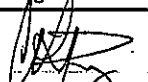
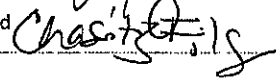
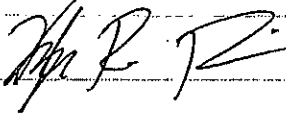
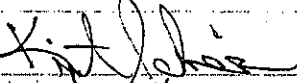
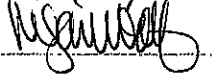
Dodge County

Name	Signature	Email	Correct?	Corrected Email	Judicial	Legal	Credits	
							Social Work	Law Enforcement
Adayta Axelson		aaxelson@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bob Barrington		Bob.Barrington@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Andrew Bissonnette		[REDACTED]	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jennifer Dominik		jdominik@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Craig Holler		choller@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kim Kunz		kkunz@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Matthew Marvin		mmarvin@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lesley Steinmetz		lsteinmetz@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
John Storck		John.Storck@wi.courts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Greg Volland		volland@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jay Westhuis		jwesthuis@co.dodge.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Day 3

Madison Treatment Court Standards Training Sign-In Friday, September 11, 2015

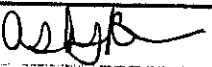
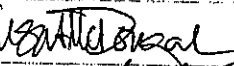
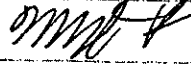


Grant County

Name	Signature	Email	Correct?	Corrected Email	Credits			
					Judicial	Legal	Social Work	Law Enforcement
Craig Day		craig.day@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chasity Fitzgerald		chasityr.fitzgerald@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jack Johnson		jjohnson@co.grant.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kyle Reiman		olivator@opd.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lisa Riniker		Lisa.Riniker@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kristin Schier		kschier@co.grant.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Megan Wolf		MWolf@unifiedservices.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Day 3

Madison Treatment Court Standards Training Sign-In
Friday, September 11, 2015



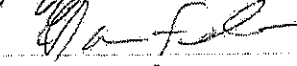
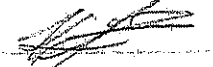

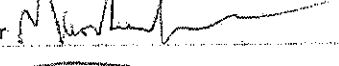
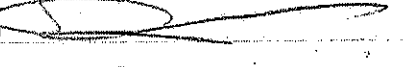
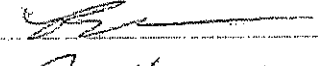
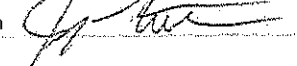
Iowa County

Name	Signature	Email	Correct?	Corrected Email	Credits			
					Judicial	Legal	Social Work	Law Enforcement
Ashley Barman		ashley.barman@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Lisa McDougal		mcdougall@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Michael Peterson		mike.peterson@iowacounty.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Matthew Allen		matthew.allen@iowacounty.org			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brian Deike		CO DBYKE@IOWACOUNTY.GOV			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Day 3

Madison Treatment Court Standards Training Sign-In Friday, September 11, 2015



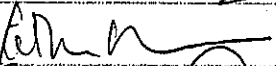
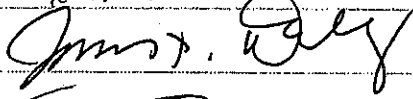

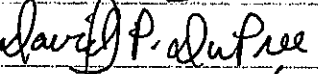
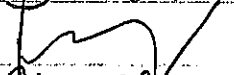
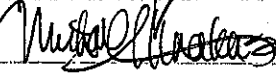
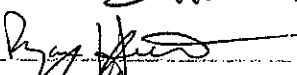


Jefferson County

Name	Signature	Email	Correct?	Corrected Email	Judicial	Legal	Credits	
							Social Work	Law Enforcement
Kathi Cauley		kathic@jeffersoncountywi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jeff De La Rosa		delarosaj@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
James Feldman		jfeldman@wiscs.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kristi Gusse		kgusse@wiscs.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Holly Pagel		hollyp@jeffersoncountywi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maia Riesebieter		mriesebieter@wiscs.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
David Wambach		David.Wambach@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ben Wehmeier		benjaminw@jeffersoncountywi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jennifer Weston		Jennifer.Weston@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Page 3

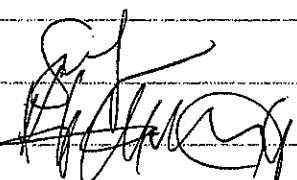


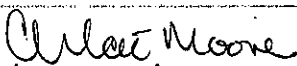

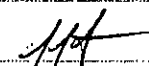
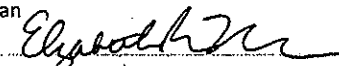
Madison Treatment Court Standards Training Sign-In Friday, September 11, 2015

Rock County

Name	Signature	Email	Correct?	Corrected Email	Credits			
					Judicial	Legal	Social Work	Law Enforcement
Alan Bates		Alan.Bates@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mason Braunschweig		Mason.Braunschweig@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Katharine Buker		Kate.Buker@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* James Daley		James.Daley@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sean Drury		drurys@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
David DuPree		dpdupree959@yahoo.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Paul Gregory		gregoryp@uww.edu	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Michael Haakenson		Michael.Haakenson@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ryan Hartwig		Ryan.Hartwig@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brad Hawbecker		hawbecker@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Erin Hawkinson		Erin.Hawkinson@wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jennifer Hendrickson		hendricj@co.rock.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

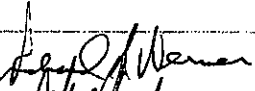

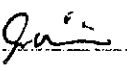
Madison Treatment Court Standards Training Sign-In
Friday, September 11, 2015

Rock County Continued

Name	Signature	Email	Correct?	Corrected Email	Judicial	Legal	Credits	
							Social Work	Law Enforcement
Jamil S Khan		jskhan@charter.net	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sarah Krahn		sarah.krahn@wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sara Leidholdt		Sara.Leidholdt@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kelly Mattingly		mattinglyk@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
David Melby		David.Melby@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emily Miller		millere@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Tiffany Minguey		LeyT@co.rock.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chloe Moore		chloe.moore@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anne Nack		Anne.Nack@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jim Neitzel		Louis.Neitzel@wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eric Nelson		nelsone@opd.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Elizabeth Pohlman McQuillen		pohlman@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Madison Treatment Court Standards Training Sign-In
Friday, September 11, 2015

Rock County Continued

Name	Signature	Email	Correct?	Corrected Email	Credits			
					Judicial	Legal	Social Work	Law Enforcement
Tonya Ramsey		ramsey@co.rock.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rebecca Rudolph		rudolphr@co.rock.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stephanie Bloedorn		stephanie.bloedorn@va.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Amanda Suarez		suarez@co.rock.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Richard Werner		richard.werner@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cheniqua White		cheniqua.white@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jay Williams		williamj@co.rock.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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Walgreens

#06130 3700 UNIVERSITY AVE
MADISON, WI 53705
608-238-7109

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03400098799 10.99
RETURN VALUE 10.99
BOARD DUDES ERGO D/E ERASER
71496314569 5.78
2 @ 2.89
RETURN VALUE 2.89 ea

TOTAL 16.77
VISA ACCT 16.77
CHANGE .00

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Name & Address

FRONT DESK CASHIER - MADISON

UNITED STATES OF AMERICA

Room H 6
Arrival Date 4/7/2005 12:00:00 AM
Departure Date

Adult/Child
Room Rate

Rate Plan:
HH #
AL:
Car:

Folio

HHONORS
HILTON WORLDWIDE

9/9/2015

DATE	DESCRIPTION	ID	REF. NO	CHARGES	CREDITS	BALANCE
8/9/2015	GIFT SHOP	RYANOWLE	1282200	\$2.00		
8/9/2015	CASH	RYANOWLE	1282207		(\$2.00)	
9/9/2015	GIFT SHOP	JMOEHN	1282214	\$4.00		
9/9/2015	VS XXXXXXXXXX	JMOEHN	1282215		(\$4.00)	
	BALANCE					\$0.00

ACCOUNT NO.

CARD MEMBER NAME

FRONT DESK CASHIER - MADISON

ESTABLISHMENT NO. & LOCATION

ESTABLISHMENT AGREES TO TRANSMIT TO CARD HOLDER FOR PAYMENT

DATE OF CHARGE
9/9/2015

FOLIO NO./CHECK NO.
377143 A

AUTHORIZATION
091524

INITIAL

PURCHASES & SERVICES

TAXES

TIPS & MISC.

TOTAL AMOUNT

-4.00

PAYMENT DUE UPON RECEIPT

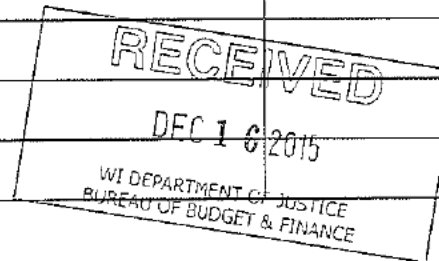
MERCHANDISE AND/OR SERVICES PURCHASED ON THIS CARD SHALL NOT BE RESOLD OR RETURNED FOR A CASH REFUND.

PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll) Michelle Sandry	For Statement Date: 09-11-15
Purchasing Card Number (last 4 digits only): [REDACTED]	

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory # for items is \$5,000 or less
09-08-15	KC Fortune Cookie Factory	Item for vendors at Jail Administrators conference				101.76	✓
09-10-15	Holiday Inn Express Milwaukee, WI	Instructor update			90.00	180.00	✓



CARD TOTAL \$281.76

I will JK -
ja

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

Michelle Sandry
Cardholder

11-9-15
Date

Stacy E. H.
Supervisor

11/16/15
Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

[Signature]
Div/Bureau P-Card Coordinator

12/15/15
Date

2-2-16
OK
LP

Billing Address
WI DOJ, TRA
MICHELLE S/
17 W. MAIN
P.O. BOX 70
MADISON, W

Cardholder

Signature _____ Date _____

Approver

Signature _____ Date _____

Billing Phone
608-267-132

Order Grant

Payment Method

Order Summary

Shipping Details

Order #:

Order Date:

Shipping Method

Products Supplied

UPS Ground

Total for this order

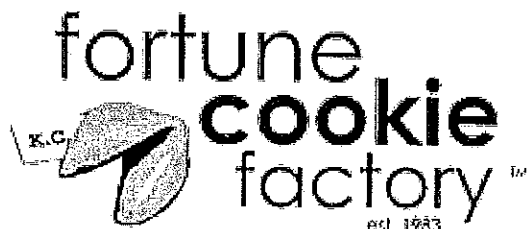
NEW ACCOUNT ACTIVITY						
POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT	
09-10	09-08	KC FORTUNE COOKIE FACTORY 612-724-6116 MN PUR ID: 21050 TAX: 0.00	24707805252980154915538	5399	101.76	
09-11	09-10	HOLIDAY INN EXPRESS HOTEL MILWAUKEE WI 0000966360 ARRIVAL: 09-10-15	24765015253206009663600	3501	180.00	

Products of Interest

250 x Cust
SKU:

You

Default Accounting Code: 455TS TS009			
CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER [REDACTED]		ACCOUNT SUMMARY
	STATEMENT DATE 09-11-15	DISPUTED AMOUNT \$ 0.00	
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	AMOUNT DUE \$ 0.00 DO NOT REMIT		PREVIOUS BALANCE \$ 0.00
			PURCHASES & OTHER CHARGES \$281.76
			CASH ADVANCES \$ 0.00
			CASH ADVANCE FEE \$ 0.00
			CREDITS \$ 0.00
			TOTAL ACTIVITY \$281.76



KCFortuneCookieFactory.com
2737 Minnehaha Avenue South
Minneapolis, MN 55406
1-800-808-3678

Purchasing Information:

E-mail Address: sandrymm@doj.state.wi.us

Billing Address:

WI DOJ, TRAINING AND STANDARDS
MICHELLE SANDRY
17 W. MAIN ST.
P.O. BOX 7070
MADISON, WI 53703

Shipping Address:

WI DOJ, TRAINING AND STANDARDS
MICHELLE SANDRY
17 W. MAIN ST.
P.O. BOX 7070
MADISON, WI 53703

Billing Phone:

608-267-1327

Shipping Phone:

608-267-1327

Order Grand Total: \$101.76

Payment Method: Credit card

Order Summary:**Shipping Details:**

Order #: 21050
Order Date: 9/8/15
Shipping Method: UPS Ground
Products Subtotal: \$87.50
UPS Ground: \$14.26

Total for this Order: \$101.76

Products on order:

250 x Custom Fortune Cookies - \$87.50 (\$0.35 each)

SKU: B2C-CustomMessage+Traditional

- When do you want this to arrive?: 10/08/2015
- What type of wrapper would you like?: Traditional Wrapper with Ingredient List
- Wrapper:

Your Messages

- Group 1, Msg 1, front
Your everlasting patience will be rewarded.
- Group 1, Msg 2, front
Your many hidden talents will become obvious to those around you.
- Group 1, Msg 3, front
An exciting opportunity lies ahead.
- Group 1, Msg 4, front

- Approach all areas of life with bold enthusiasm.
- Group 1, Msg 5, front
Don't be afraid of competition.
 - Group 1, Msg 6, front
Ideas are like children; there are none so wonderful as your own.
 - Group 1, Msg 7, front
A pleasant surprise is in store for you.
 - Group 1, Msg 8, front
Confident people are able to laugh at themselves.
 - Group 1, Msg 9, front
Living with a commitment to excellence shall take you far.
 - Group 1, Msg 10, front
Say "Hello" to others. You will have a happier day.
 - Group 1, Msg 11, front
Do not rush through life, pause and enjoy it.
 - Group 1, Msg 12, front
Good luck is coming your way.
 - Group 1, Msg 13, front
No one's been hurt from laughing too much.
 - Group 1, Msg 14, front
The time is right to make new friends.
 - Group 1, Msg 15, front
Your past success will be overshadowed by future success.

Print invoice

Close window



1

09-10-15

Michell Sandry 17 W Maine St Madison WI Madison WI 53703 United States	Folio No. : 175739 A/R Number : Group Code : Company : Business Membership No. : Invoice No. :	Room No. : 2025 Arrival : 09-08-15 Departure : 09-10-15 Conf. No. : 67794165 Rate Code : IMSTI Page No. : 1 of 1
--	---	---

Date	Description	Charges	Credits
09-08-15	*Accommodation	90.00	
09-09-15	Visa		180.00
09-09-15	*Accommodation	90.00	
Total		180.00	180.00
Balance		0.00	

Guest Signature:

I have received the goods and / or services in the amount shown hereon. I agree that my liability for this bill is not waived and agree to be held personally liable in the event that the indicated person, company, or associate fails to pay for any part or the full amount of these charges. If a credit card charge, I further agree to perform the obligations set forth in the cardholder's agreement with the issuer.

Holiday Inn Express Milwaukee Airport
1400 West Zellman Court
Milwaukee, WI 53221
Telephone: (414) 563-4000 Fax: (414) 563-4003

Price, Lori A.

From: Sandry, Michelle M.
Sent: Wednesday, February 03, 2016 1:38 PM
To: Price, Lori A.
Subject: RE: 9-11-15 P-Card Log, BEA Needed

Hi Lori,

It was a promotional item for the vendor area. The BEA for the Jail Administrators Conference does not include this so I will need to have another one signed. This was decided to purchase this several months after the original BEA was signed. I'll get to it now.

Michelle



Michelle M. Sandry
Jail Training Consultant
Training and Standards Bureau
608/267-1327
Fax: 608/266-7869
www.wilenet.org



From: Price, Lori A.
Sent: Wednesday, February 03, 2016 1:33 PM
To: Sandry, Michelle M.
Subject: 9-11-15 P-Card Log, BEA Needed

Hi Michelle,

In regards to the fortune cookie purchase for the Jail Administrators Conference, I will need a copy of the approved Business Event Authorization form. According to the BEA Policy,

"Promotional Items: If items are to be purchased by DOJ and given to event attendees information regarding the item and dollar value must be provided on the BEA form. The PCard must be used to purchase these items when costs are \$5,000 or less."

If a BEA was not done for this purchase, one will need to be done to include with the log. Also, I was somewhat undecided if the cookies fell under a meal/break (food) item or promotional item but either way, I would need an approved BEA.

Please respond as soon as possible so I can close out this log

Lori Price
Financial Specialist
Wisconsin Department of Justice
Phone (608) 266-1979
Fax (608) 266-1656
Pricela@doj.state.wi.us

PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll) Sara Phelan	For Statement Date: 9/11/15
Purchasing Card Number (last 4 digits only): [REDACTED]	

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory # for items is \$5,000 or less
8/20	CVTC	Executive Training Eau Claire				\$413.65 ✓	
8/30	5.11 Tactical	CIB Conference giveaway	566P321			\$4,500	
8/28	Amazon	Conference audio cables				\$143.88 ✓	
8/31	5.11 Tactical	Employee Uniforms				\$625.54	
9/2	United Airlines	Dr Taylor – Heroin Summit Speaker	10/12-10/13/15			\$745.20 ✓	
9/3	Shutterstock	Unknown transaction – credited				\$199.00 ✓	
9/3	Shutterstock	Unknown transaction – credited				\$249.00 ✓	
9/2	Agent Fee	Dr Taylor – Heroin Summit Speaker				\$6.00 ✓	
9/8	Shutterstock – credit	Credit				(\$199.00) ✓	
9/8	Shutterstock – credit	Credit				(\$249.00) ✓	

RECEIVED
DEC 16 2015
WI DEPARTMENT OF JUSTICE
BUREAU OF BUDGET & FINANCE

CARD TOTAL

\$6,434.27

I will JR - ja

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

[Signature]
Cardholder
11/11/15
Date

[Signature]
Supervisor
11/11/15
Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

[Signature]
Div/Bureau P-Card Coordinator
12/15/15
Date

2-17-16
OW
JP



U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

ST OF WI - DOJ

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 09-11-15
TOTAL ACTIVITY \$ 6,434.27

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT

RECEIVED

SEP 21 2015

WISCONSIN DEPT OF JUSTICE
TRAINING & STANDARDS BUREAU

CVTC CAT
EVENT:

Event type

Location

Contact

Phone #

Email:

Dept.

Dept. #

Service

Set-up

|||||

B = Bakery, S = S

Quantity

000003139 1 AV 0.391 106481190856605 P

SARA PHELAN
TAX [REDACTED]
DEPT OF JUSTICE CIB
17 W MAIN ST
MADISON WI 53703-3960

Cardholder

Signature _____ Date _____

Approver

Signature _____ Date _____

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
08-31	08-20	CVTC 40017774 EAU CLAIRE WI	24164075240235480011871	5814	413.65
08-31	08-30	5.11 TACTICAL 2095274511 CA PUR ID: DOJ PISTOL CASE TAX: 0.00	24493985242200284800018	5699	4,500.00
08-31	08-28	AMAZON MKTPLACE PMTS AMZN.COM/BILL WA PUR ID: 115-2568485-34994 TAX: 0.00	24692105240000470404003	5942	143.88
09-01	08-31	5.11 TACTICAL 866-457-1726 CA PUR ID: 860 TAX: 0.00	24431055243286000000070	5691	625.54
09-04	09-02	UNITED 0167674099243 800-932-2732 TX TAYLOR/NICOLAS TOM DEPARTURE: 10-12-15	24692165246000445576364	3000	745.20
09-04	09-03	MTJ UA Q DEN UA Q MSN UA Q DEN AU Q MTJ STK*SHUTTERSTOCK, INC. 866-663-3954 NY PUR ID: 49983716 TAX: 0.00	24692165246000552555847	7333	199.00
09-04	09-03	STK*SHUTTERSTOCK, INC. 866-663-3954 NY PUR ID: 49983767 TAX: 0.00	24692165246000552562496	7333	249.00
09-04	09-02	AGENT FEE 8900651581780 CORPORATE TRA WA TAYLOR/NICOLAS DEPARTURE: 09-02-15 XAA XD X XAO	24717055246872462565312	4511	6.00
09-09	09-08	STK*SHUTTERSTOCK, INC. 866-663-3954 NY PUR ID: 49983716 TAX: 0.00	74892165251000946476194	7333	199.00CR

Default Accounting Code: 455TS TS028

Comments:

Office

CUSTOMER SERVICE CALL

800-344-5696

ACCOUNT NUMBER

[REDACTED]

ACCOUNT SUMMARY

PREVIOUS BALANCE \$.00

STATEMENT DATE

09-11-15

DISPUTED AMOUNT

\$.00

PURCHASES &
OTHER CHARGES \$6,882.27

SEND BILLING INQUIRIES TO:

C/O U.S. BANCORP SERVICE CENTER, INC
U.S. BANK NATIONAL ASSOCIATION
P.O. BOX 6335
FARGO, ND 58125-6335

AMOUNT DUE

\$ 0.00

DO NOT REMIT

CASH ADVANCES \$.00

CASH ADVANCE FEE \$.00

CREDITS \$448.00

TOTAL ACTIVITY \$6,434.27



CVTC CAT
EVENT:

Event type _____
Location _____
Contact _____
Phone # _____
Email: tel _____
Dept. _____
Dept. # _____
Service _____
Set-up _____
|||||||

B = Bakery, S = Sal

Quantity

7:3

Co
Ice

11:

Ha

Ice

1:3

Asi

Asi

tax

Comments: Acc

Office

Account Name:	SARA PHELAN
Company Name:	ST OF WI - DOJ
Account Number:	
Statement Date:	09-11-15

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
09-09	09-08	STK*SHUTTERSTOCK, INC. 866-663-3954 NY PUR ID: 49983767 TAX: 0.00	74692165251000946478430	7333	249.00CR

CVTC CATERING SERVICES

EVENT:

Date Created: **07/14/15**

Event type	Law Enforcement Mtg	Date	06.18.2015	INV. #	
Location	103A	Day	Thursday	PICK-UP	
Contact	Sara Phelan	Start Time	7:30a	DELIVERY	
Phone #	608-264-6364	End Time	4:00p	Charge	
Email:	relansm@doj.state.wi.i	Room Res.		Tax Expt #	
Dept.		F. P. T.		Billing #	see below
Dept. #		Guaranteed #		Rate	
Service		Actual #	32	Total	

Set-up

////////

B = Bakery, S = Salad, P = Cooks, C = Catering, SE = Special Events)

Quantity	Unit	Notes	Price	Amount
7:30 AM				
Coffee (all day)	5	gal	\$11.25	\$56.25
Ice water station (all day)				\$04.00
11:00am: Lunch (in hall outside of 103a)				
Hamburgers & Brats (with fixings), pasta salad, chips	32	per person	\$10.00	\$320.00
Iced tea				
1:30 Snack (in 103a)				
Assorted cookies	2	doz	\$6.70	\$13.40
Assorted bars and brownies	2	doz	\$10.00	\$20.00
tax exempt				
			Total	\$413.65

Comments: **Accounting String:** _____ **Tax Rate** 0.00% \$0.00

_____ **Total Invoice** \$413.65

Office

Cook

Catering

2-2-16

List has 30 people list
don't include DOS stuff,

so 32 is ok

LP

BUSINESS EVENT AUTHORIZATION

(This form must be completed for every business event which will have costs paid by DOJ.)

Name and Purpose of Event: Executive Training Series

Dates/Times: 06/18 - 6/19, 8am to 12 noon

City: Eau Claire

Sponsoring Division/Bureau: DLES/T&S

Coordinator: Sara Phelan

Estimated # of Attendees: State Employees (* See below): 5

Non-State Employees: 75

1. Justification for site selection: This must be provided if the location of the event will not a state government or university facility when more than 50% of attendees will be state employees. *Multiple locations were selected to offer training throughout the state.*

2. Justification for Food Costs: Meals and break items, including service fees, must always be at state rates. Justification must be provided if these costs will exceed state maximums. Additionally, if more than 50% of attendees will be state employees headquartered in the business event city, justification must be provided for any food costs. *Lunch and breaks will be provided; state rate rules will be followed for this event.*

3. Giveaways: If items are to be purchased by DOJ and given to event attendees provide a description of the item, the dollar value of the item, the anticipated total cost, and the name of the vendor from whom the items will be purchased.

None

APPROVALS:


Signature - Event Coordinator

4/7/15
Date


Signature - Supervisor

4/8/15
Date

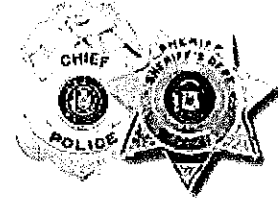
* If more than 50% of attendees will be state employees and costs will be incurred, approval of the Administrator, Division of Management Services, must be given prior to the business event.

Signature - Administrator, DMS

Date

Executive Training Series

Chippewa Valley Technical College
June 18, 2015



Agenda

- 8:00 am *Welcoming Remarks*
- 8:15 am - *Opiates/Naloxone*
9:45 am Carrie Hemming, Police Officer, Madison Police Department
- 10:00 am *Prescription Drug Monitoring Program*
Chad Zadrazil, Department of Safety and Professional Services
- 10:30 am *DNA @ Arrest*
Miriam Falk, Assistant Attorney General, Wisconsin Department of Justice
- 11:30 am Lunch (provided)
- 12:30 pm - *Domestic Abuse & Sexual Assaults*
3:00 pm Miriam Falk, Assistant Attorney General, Wisconsin Department of Justice
- 3:15 pm *Legal Update*
Miriam Falk, Assistant Attorney General, Wisconsin Department of Justice
- 4:00- pm Conference Ends – Certificates Available

Executive Training Series - Eau Claire

Thursday, June 18, 2015

Name	Company	Title	Confirmation Number
<input checked="" type="checkbox"/> Anderson, Diana	Arcadia Police Department	Chief of Police	DPN5WJBKMLF
<input checked="" type="checkbox"/> Atkinson, Eric	Menomonie Police Department	Chief	ZSN4RMGFF3V
<input checked="" type="checkbox"/> Balow, Gregory	Pepin County Sheriff's Dept	Chief Deputy	L3NB26CHB8D
<input checked="" type="checkbox"/> Carpenter, Billy	Tomah Veterans Affairs Police Dept.	Lieutenant	DLN5DQFSS2Q
<input checked="" type="checkbox"/> Clapero, Joel	Hayward City Police Dept.	Chief of Police	GLND8GW97XQ
<input type="checkbox"/> Collins, Ed	Milltown Police Department	Chief	GBN86R8JMF9
<input checked="" type="checkbox"/> Collins, Mark	Vilas County Sheriff's Office	Chief Deputy	ZSNMT5SPVFK
<input checked="" type="checkbox"/> Dachel, Chad	Fall Creek PD	Chief of Police	XQNSVTXWLZY
<input checked="" type="checkbox"/> Dahl, Wayne	Trempealeau County Sheriff's Office	Lieutenant	VXN93BNWFKT
<input type="checkbox"/> DuBois, John	Spring Valley Police Department	Chief	PVN8PHR6B42
<input checked="" type="checkbox"/> Emmons, Nathan	Barron Police Department	Investigator/K9 Officer	XNNR28WS44K
<input checked="" type="checkbox"/> Freeman, Mike	Barron Police Department	Assistant Chief of Police	NXN6FDJ3WHK
<input checked="" type="checkbox"/> Hnath, James	Ashland County Sheriff's Office	Chief Deputy	JRNK97F2S7D
<input checked="" type="checkbox"/> Hoyord, Chad 5 hrs	Eau Claire Police Department	Deputy Chief	JJNFSPDD8SX
<input checked="" type="checkbox"/> James, Jesse	Altoona Police Department	Chief of Police/Fire	DSNTDK93GZL
<input type="checkbox"/> Jerdee, Miranda	St. Croix Tribal Police Department	Patrol Investigator	PZNXPRBLX5T
<input type="checkbox"/> Kanable, Chad	Richland County Sheriff's Dept.	Chief Deputy	Z9N456TNBCX
<input checked="" type="checkbox"/> Ladwig, Eric	Ellsworth Police Department	Chief	VGN9LHPXWBS
<input checked="" type="checkbox"/> Lamkin, Greg	Boyceville Police Department	Chief of Police	G5NK9CRPTJQ
<input checked="" type="checkbox"/> Livingston, David	Altoona Police Department	Lieutenant	LBNJ357YKJB
<input checked="" type="checkbox"/> Loesel, Paul	Trempealeau County Sheriff's Office	Lieutenant	FQN4QTQXWD2
<input checked="" type="checkbox"/> McWilliams, Aaron	Roberts Police Department	Chief of Police	NXNVJX3VYPS
<input checked="" type="checkbox"/> Miller, Byron	Barron Police Department	Chief of Police	NQNMVCMCTBT

30 people

DOT stuff not on list

<input type="checkbox"/>	puccetti, stephen	VA Police	Deputy Chief of Police	DTNSNH6B7S5
<input type="checkbox"/>	Reinders, Harlan	Trempealeau County Sheriff's Office	Chief Deputy	KXNQJFQ8JXC
<input checked="" type="checkbox"/>	Ridgeway, Stanley	Durand Police Department	Chief of Police	PRNVM67XGWW
<input checked="" type="checkbox"/>	Rieper, Rick	Cumberland Police Department	Chief	M9NNTN22MBW
<input checked="" type="checkbox"/>	Rutten, William	Kohler Police Department	Chief	KNNZVCGTJ7R
<input checked="" type="checkbox"/>	Severson, Colin	Buffalo County Sheriff's Department	Chief Deputy	NFN3RJX4YVX
<input checked="" type="checkbox"/>	Verges, Sharon	Thorp Police Department	Chief	DZNK2XW4R7R



www.511tactical.com

Please Remit Payments To:
5.11 Inc.
62789 Collection Center Drive
Chicago, IL 60693-0627

Wire Payments may be sent to:
Bank of America
100 West 33rd Street
New York, NY 10001
Account Name: 5.11, Inc.
Account: [REDACTED]
Routing/Transit (ABA): [REDACTED]

INVOICE

INQUIRES TO:
PHONE USA 209-527-4511
COMPANY 11 DIVISION 11
PAGE 1

SOLD TO

■ ASSOCIATION PACKAGE ACCT
730 11 73060 1005
MARKETING PACKAGES

MODESTO CA 95356

SHIP TO

■ WI DEPT OF JUSTICE
ATTN: SARA PHELAN
17 W MAIN STREET

MADISON WI 53703

DATE GAIN	PURCHASE ORDER #	Model SKU/ID	TERMS	NET DISCOUNT	CUST #	STORE #	SHIP VIA	Model SKU/ID	ORDER DATE	INVOICE #
060815	DOJ PISTOL CASE		CREDIT CARD ON		77001	1	UPS-PREPAID 9CRTN(S)	2315637	8/29/15	2828240

CES #ES40682

SALES REP

CUSTOMER SERV. REP

ASSOCIATIONS

CUSTOMER DIRECT/H

SEASON P10
START DATE 6/08/15
CANCEL DATE 9/01/15
SEE BELOW

LINE	STYLE	DESCRIPTION	COLOR	DESCRIPTION	QTY	SC	SIZE	QTY	PRICE	AMOUNT
101	5633SUS	CIB SINGLE PISTOL CASE	328	SANDSTON	300	0	1 S2	300	15.00	4500.00
		CREDIT CARD #: [REDACTED]		TRANSACTION ID:551819						

We are now sending invoices electronically. To update your email address please call: 1-866-451-1726

TRACKING # 1ZR90090309337277

Discount terms begin from date of invoice. Discounts claimed on payments received after the discount will not be allowed.

Accounts 30 Days or More past due subject to late fees not to exceed 1.5% per month, 18% ANNUAL rate.
SHIPPING TERMS:
FOB shipping point

INVOICE DUE 8/30/15

PICK TICKET # 4453233

Customer acknowledges that (i) 5.11, Inc's shipping terms are F.O.B. Shipping Point and legal title and risk of loss transfers to the Customer upon delivery by 5.11, Inc of the purchased products to the carrier, (ii) 5.11, Inc (as Customer's agent) has obtained transit insurance on behalf of the Customer listing the customer as an insured party, (iii) in the event of a transit loss, the Customer authorizes 5.11, Inc (as Customer's agent) to assist in negotiating and processing any such claims with the insurance company on the Customer's behalf and (iv) the Customer is fully responsible for all amounts related to purchased products regardless of the amount of available insurance proceeds, if any.

Requests for claims with carriers must be made within 7 days of delivery date for damaged products or 14 days from the shipment date for lost products.

TOTAL	400	4500.00
SHIPPING		
Sales Tax		
INVOICE TOTAL		4500.00



Final Details for Order #115-2568485-3499462

Print this page for your records.

Order Placed: August 25, 2015

Amazon.com order number: 115-2568485-3499462

Order Total: \$143.88

Shipped on August 28, 2015

Items Ordered

6 of: *KabelDirekt (25 feet) 3.5mm Male to 3.5mm Male Stereo Audio Cable - PRO Series* **Price** \$12.99

Sold by: KabelDirekt Products ([seller profile](#))

Condition: New

6 of: *KabelDirekt (15 feet) 3.5mm Male > 3.5mm Female Stereo Audio Extension Cable - PRO Series* \$10.99

Sold by: KabelDirekt Products ([seller profile](#))

Condition: New

Shipping Address:

Sara Phelan - Wisconsin Department of Justice
17 W MAIN ST
MADISON, WI 53703-3960
United States

Item(s) Subtotal: \$143.88

Shipping & Handling: \$6.79

Free Shipping: -\$6.79

Total before tax: \$143.88

Sales Tax: \$0.00

Shipping Speed:

FREE Shipping

Total for This Shipment: \$143.88

Payment information

Payment Method:

Visa | Last digits: [REDACTED]

Item(s) Subtotal: \$143.88

Shipping & Handling: \$6.79

Free Shipping: -\$6.79

Billing address

Sara Phelan - Wisconsin Department of Justice
17 W MAIN ST
MADISON, WI 53703-3960
United States

Total before tax: \$143.88

Estimated tax to be collected: \$0.00

Grand Total: \$143.88

Credit Card transactions

Visa ending in [REDACTED]

August 28, 2015: \$143.88

To view the status of your order, return to [Order Summary](#).

Please note: This is not a VAT Invoice.

[Conditions of Use](#) | [Privacy Notice](#) © 1996-2015, Amazon.com, Inc. or its affiliates



Please Remit Payments To:
5.11 Inc.
62789 Collection Center Drive
Chicago, IL 60693-0627

Wire Payments may be sent to:
Bank of America
100 West 33rd Street
New York, NY 10001
Account Name: 5.11, Inc.
Account [REDACTED]
Routing/Transit (ABA) [REDACTED]

INVOICE
INQUIRES TO:
PHONE USA 209-527-4511
COMPANY 11 DIVISION 11
PAGE 1

SOLD TO:

■ ASSOCIATION PACKAGE ACCT
730 11 73060 1005
MARKETING PACKAGES

MODESTO CA 95356

SHIP TO:

■ WI DEPT OF JUSTICE
ATTN: SARA PHELAN
17 W MAIN STREET

MADISON WI 53703

ORDER #	PURCHASE ORDER #	SHIPPING METHOD	TERMS	NO. DISCOUNT	CUST #	STORE #	SHIP VIA	QUANTITY	INVOICE DATE	INVOICE #
071715	WISCONSIN DOJ		NET 30		77001	1	UPS-PREPAID (CARTON(S))	2363881	7/29/15	2787794
			SALES REP		CUSTOMER SERV. REP				SEASON P10	
			ASSOCIATIONS		CUSTOMER DIRECT/H				START DATE 7/17/15	
									CANCEL DATE 8/03/15	
									SEE BELOW	
LINE	STYLE	DESCRIPTION	COLOR	DESCRIPTION	DM	SD	SIZE	QTY	PRICE	AMOUNT
100	48038	TACTICAL FLEECE	019	BLACK		A	S	1	55.61	55.61
			EM	EMBROIDERY CHAR				1	15.38	15.38
			ZB	5.11 BRANDING (				1	1.00	1.00
200	48038	TACTICAL FLEECE	724	DARK NAV		A	L	1	55.61	55.61
			EM	EMBROIDERY CHAR				1	15.38	15.38
			ZB	5.11 BRANDING (				1	1.00	1.00
300	71049	PERFORMANCE S/S POLO	019	BLACK		A	XXL	1	9.62	9.62
			EM	EMBROIDERY CHAR				1	14.38	14.38
			ZB	5.11 BRANDING (				1	1.00	1.00
700	71340	FREEDOM FLEX WOVEN S/S	092	STORM		I	XXL	1	26.21	26.21
			EM	EMBROIDERY CHAR				1	15.38	15.38
			ZB	5.11 BRANDING (				1	1.00	1.00

We are now sending invoices electronically. To update your email address please call: 1-866-451-1726

TRACKING # 1RV90090309077281

INVOICE DUE 8/28/15

PICK TICKET # 4378551

Discount terms begin from date of Invoice. Discounts claimed on payments received after the discount will not be allowed.

Accounts 30 Days or More past due subject to late fees not to exceed 1.5% per month, 18% ANNUAL rate.
SHIPPING TERMS:
FOB shipping point

TOTAL MD	4	211.57
SHIPPING		
Sales Tax		
INVOICE TOTAL		211.57

Customer acknowledges that (i) 5.11, Inc's shipping terms are F.O.B. Shipping Point and legal title and risk of loss transfers to the Customer upon delivery by 5.11, Inc of the purchased products to the carrier, (ii) 5.11, Inc (as Customer's agent) has obtained transit insurance on behalf of the Customer listing the customer as an insured party, (iii) in the event of a transit loss, the Customer authorizes 5.11, Inc (as Customer's agent) to assist in negotiating and processing any such claims with the insurance company on the Customer's behalf and (iv) the Customer is fully responsible for all amounts related to purchased products regardless of the amount of available insurance proceeds, if any.

Requests for claims with carriers must be made within 7 days of delivery date for damaged products or 14 days from the shipment date for lost products.



www.511tactical.com

Please Remit Payments To:
5.11 Inc.
62789 Collection Center Drive
Chicago, IL 60693-0627

Wire Payments may be sent to:
Bank of America
100 West 33rd Street
New York, NY 10001
Account Name: 5.11, Inc.
Account # [REDACTED]
Routing/Transit (ABA) # [REDACTED]

INVOICE

INQUIRES TO:
PHONE USA 209-527-4511
COMPANY 11 DIVISION 11
PAGE 1

SOLD TO

■ ASSOCIATION PACKAGE ACCT
730 11 73060 1005
MARKETING PACKAGES

MODESTO CA 95356

SHIP TO

■ WI DEPT OF JUSTICE
ATTN: SARA PHELAN
17 W MAIN STREET

MADISON WI 53703

ORDER DATE	PURCHASE ORDER #	SHIPPING ORIGIN	TERMS	NET DISCOUNT	CUST #	STORE #	SHIP VIA	ORDER CONTROL #	INVOICE DATE	INVOICE #
071715	WISCONSIN DOJ		NET 30		77001	1	UPS-PREPAID 10RTN(S)	2363881	8/21/15	2817466
			SALES REP		CUSTOMER SERV. REP				SEASON P10	
			ASSOCIATIONS		CUSTOMER DIRECT/H				START DATE 7/17/15 CANCEL DATE 8/03/15 SEE BELOW	
LINE	STYLE	DESCRIPTION	COLOR	DESCRIPTION	QTY	SIZE	PRICE	AMOUNT		
501	48112	SABRE 2.0 JACKET	019	BLACK	1	XXL	148.61	148.61		
			EM	EMBROIDERY CHAR	1		15.38	15.38		
			ZB	5.11 BRANDING (	1		1.00	1.00		
600	48112	SABRE 2.0 JACKET	019	BLACK	1	3XL	148.61	148.61		
			EM	EMBROIDERY CHAR	1		15.38	15.38		
			ZB	5.11 BRANDING (	1		1.00	1.00		
We are now sending invoices electronically. To update your email address please call: 1-866-451-1726										

TRACKING # 1ZRV90090309271678

Discount terms begin from date of invoice. Discounts claimed on payments received after the discount will not be allowed.

Accounts 30 Days or More past due subject to late fees not to exceed 1.5% per month, 18% ANNUAL rate.
SHIPPING TERMS:
FOB shipping point

INVOICE DUE 9/20/15

PICK TICKET # 4421334

TOTAL MD	2	342.98
SHIPPING		
Sales Tax		
INVOICE TOTAL		329.98

Customer acknowledges that (i) 5.11, Inc's shipping terms are F.O.B. Shipping Point and legal title and risk of loss transfers to the Customer upon delivery by 5.11, Inc of the purchased products to the carrier, (ii) 5.11, Inc (as Customer's agent) has obtained transit insurance on behalf of the Customer listing the customer as an insured party, (iii) In the event of a transit loss, the Customer authorizes 5.11, Inc (as Customer's agent) to assist in negotiating and processing any such claims with the insurance company on the Customer's behalf and (iv) the Customer is fully responsible for all amounts related to purchased products regardless of the amount of available insurance proceeds, if any.
Requests for claims with carriers must be made within 7 days of delivery date for damaged products or 14 days from the shipment date for lost products.



Please Remit Payments To:
5.11 Inc.
62789 Collection Center Drive
Chicago, IL 60693-0627

Wire Payments may be sent to:
Bank of America
100 West 33rd Street
New York, NY 10001
Account Name: 5.11, Inc.
Account # [REDACTED]
Routing/Transit (ABA) [REDACTED]

INVOICE

INQUIRES TO:
PHONE USA 209-527-4511
COMPANY 11 DIVISION 11
PAGE 1

SENT TO

■ ASSOCIATION PACKAGE ACCT
730 11 73060 1005
MARKETING PACKAGES

MODESTO CA 95356

SHIP TO

■ WI DEPT OF JUSTICE
ATTN: SARA PHELAN
17 W MAIN STREET

MADISON WI 53703

ORDER #	PURCHASE ORDER #	ITEM #	TERMS	NO. DISCOUNT	CUST #	STORE #	SHIP VIA	SHIP CONTROL #	INVOICE DATE	INVOICE #
071715	WISCONSIN DOJ		NET 30		77001	1	UPS-PREPAID 1CRTN(S)	2363881	10/15/15	2894925
			SALES REP	CUSTOMER SERV. REP					SEASON	P10
			ASSOCIATIONS	CUSTOMER DIRECT/H					START DATE	7/17/15
									CANCEL DATE	8/03/15
									SEE BELOW	
LINE	STYLE	DESCRIPTION	COLOR	DESCRIPTION	DM	SC	SIZE	QTY	PRICE	AMOUNT
400	38068	WM SIERRA SOFTSHELL	019	BLACK		I	M	1	67.61	67.61
				EM EMBROIDERY CHAR				1	15.38	15.38
				ZB 5.11 BRANDING (				1	1.00	1.00
We are now sending invoices electronically. To update your email address please call: 1-866-451-1726										

TRACKING # 12RV90090309739922

INVOICE DUE 11/14/15

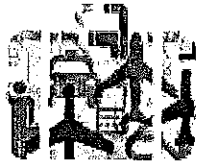
PICK TICKET # 4541179

Discount terms begin from date of invoice. Discounts claimed on payments received after the discount will not be allowed.

Accounts 30 Days or More past due subject to late fees not to exceed 1.5% per month, 10% ANNUAL rate.
SHIPPING TERMS:
FOB shipping point

TOTAL MD	1	82.99
SHIPPING		
Sales Tax		
INVOICE TOTAL		82.99

Customer acknowledges that (i) 5.11, Inc's shipping terms are F.O.B. Shipping Point and legal title and risk of loss transfers to the Customer upon delivery by 5.11, Inc of the purchased products to the carrier, (ii) 5.11, Inc (as Customer's agent) has obtained transit insurance on behalf of the Customer listing the customer as an insured party, (iii) in the event of a transit loss, the Customer authorizes 5.11, Inc (as Customer's agent) to assist in negotiating and processing any such claims with the insurance company on the Customer's behalf and (iv) the Customer is fully responsible for all amounts related to purchased products regardless of the amount of available insurance proceeds, if any.
Requests for claims with carriers must be made within 7 days of delivery date for damaged products or 14 days from the shipment date for lost products.



corporate travel management

CTM Government Division
Phone: 206-674-4335
Hrs. Mon-Sun 7a-7p
us.travelctm.com

ADD TO OUTLOOK




Wednesday, 2SEP 2015 10:15 AM EDT

Passengers: NICOLAS TODD TAYLOR

Agency Reference Number: KNC GDK

STATE OF WISCONSIN
101 E. WILSON ST, 6TH FLOOR
MADISON WI 53703-3405

Review this itinerary for accuracy regarding flights/times/dates and personal information.
CTM must be notified within 24 hours regarding corrections.
Thank you for choosing CTM.
Agent: CTM Automation BR21

AIR	Monday, 12OCT 2015		
United Airlines		Flight Number: 4873	Class: Q-Coach/Economy
Operated By: /REPUBLIC AIRLINES DBA UNITED EXPRESS		Depart: 08:10 AM	
From: (MTJ) Montrose CO, USA		Arrive: 09:16 AM	
To: (DEN) Denver CO, USA		Duration: 1 hour(s) 6 minute(s)	
Stops: Nonstop		Status: CONFIRMED	Miles: 184 / 294 KM
Seats: 18B			
Equipment: DeHavilland Dash 8-400 Turboprop			
United Airlines Confirmation number is NJ480V			
Check in on-line to obtain boarding pass: United			
Click here for Baggage policies and fees: United			
AIR	Monday, 12OCT 2015		
United Airlines		Flight Number: 1821	Class: Q-Coach/Economy
From: (DEN) Denver CO, USA		Depart: 12:35 PM	
To: (MSN) Madison WI, USA		Arrive: 03:49 PM	
Stops: Nonstop		Duration: 2 hour(s) 14 minute(s)	
Seats: 37C		Status: CONFIRMED	Miles: 838 / 1341 KM
Equipment: Boeing 737-800 Jet		MEAL: FOOD-BEV/PUR	
United Airlines Confirmation number is NJ480V			
Check in on-line to obtain boarding pass: United			
Click here for Baggage policies and fees: United			
AIR	Tuesday, 13OCT 2015		
United Airlines		Flight Number: 0465	Class: Q-Coach/Economy

From: (MSN) Madison WI, USA

To: (DEN) Denver CO, USA

Stops: Nonstop

Seats: 29D

Equipment: Airbus A320 Jet

Depart: 04:42 PM

Arrive: 06:15 PM

Duration: 2 hour(s) 33 minute(s)

Status: CONFIRMED

Miles: 838 / 1341 KM

MEAL: FOOD-BEV/PUR

United Airlines Confirmation number is NJ480V

Check in on-line to obtain boarding pass: [United](#)

Click here for Baggage policies and fees: [United](#)

AIR

Tuesday, 13OCT 2015



United Airlines

Operated By: /REPUBLIC AIRLINES DBA UNITED EXPRESS

Flight Number: 3856

Class: Q-Coach/Economy

From: (DEN) Denver CO, USA

Depart: 06:55 PM

To: (MTJ) Montrose CO, USA

Arrive: 07:59 PM

Stops: Nonstop

Duration: 1 hour(s) 4 minute(s)

Seats: 17C

Status: CONFIRMED

Miles: 184 / 294 KM

Equipment: DeHavilland Dash 8-400 Turboprop

United Airlines Confirmation number is NJ480V

Check in on-line to obtain boarding pass: [United](#)

Click here for Baggage policies and fees: [United](#)

FOR *EMERGENCY* AFTER HOURS SERVICE WITHIN THE US

OR CANADA CALL 800-358-1125 AND GIVE CALLING CODE

S-5CWG. AFTER HOURS FEES WILL APPLY.

DEPT/AGY-WISCONSIN DEPARTMENT OF JUSTICE

Ticket/Invoice Information

Ticket for: NICOLASTODD TAYLOR

Date issued: 9/2/2015 Invoice Nbr: 8017063

Ticket Nbr: UA7674099243 Electronic Tkt: Yes Amount: 745.20

Base: 651.16 US Tax: 48.84 USD XT Tax: 45.20 USD

Charged to: [REDACTED]

Service fee: NICOLAS TODD TAYLOR

Date issued: 9/2/2015

Document Nbr: XD0651581780

Amount: 6.00

Charged to: [REDACTED]

Total Tickets: 745.20

Total Fees: 6.00

Total Amount: 751.20

Please check carry on requirements at www.tsa.gov.

Charges may apply for checked baggage. Contact carrier prior to travel.

For International Travel, please check the latest [State Department Advisories](#).

Terms & Conditions information.

Airport Parking

Price, Lori A.

From: Phelan, Sara M.
Sent: Thursday, February 04, 2016 8:46 AM
To: Price, Lori A.
Subject: RE: 9-11-15 P-Card Log, BEA and Further Clarification Needed
Attachments: BEA CIB Conference 2015.pdf

See attached BEA.

The "uniform shirts" are required conference attire for staff.



Sara Phelan
Training Officer - Event Coordinator
Wisconsin Department of Justice
Division of Law Enforcement Services
Training & Standards Bureau
(608) 264-6364

DOJ Exceptional Service Awards
Nomination forms found [here](#)

AG Summit on Public Safety
March 14-16
Kalahari Resort
[Click here](#)



**PAIN
KILLERS**



TAKE THE PLEDGE
DOSE OF REALITY
PREVENT PRESCRIPTION PAINKILLER ABUSE.

From: Price, Lori A.
Sent: Wednesday, February 03, 2016 3:04 PM
To: Phelan, Sara M.
Subject: 9-11-15 P-Card Log, BEA and Further Clarification Needed

Hi Sara,

For the 300 pistol cases purchase for the CIB conference (as listed on your 9-11-15 p-card log), I will need a copy of the approved Business Event Authorization form. If a BEA was not done for this purchase, one will need to be done to include with the log.

Also, there were some "Employee Uniforms" purchases through 5.11 Tactical. What was the business purpose for this uniforms purchase?

Lori Price
Financial Specialist
Wisconsin Department of Justice
Phone (608) 266-1979
Fax (608) 266-1656
Pricela@doj.state.wi.us

BUSINESS EVENT AUTHORIZATION

(This form must be completed for every business event which will have costs paid by DOJ.)

Name and Purpose of Event: 2015 CIB Conference

Dates/Times: Sept 14th-18th 2015 City: Wisconsin Dells

Sponsoring Division/Bureau: DLES/CIB Coordinator: Sara Phelan

Estimated # of Attendees: State Employees (* See below): 40

Non-State Employees: 350

1. Justification for site selection: This must be provided if the location of the event will not a state government or university facility when more than 50% of attendees will be state employees.

N/A

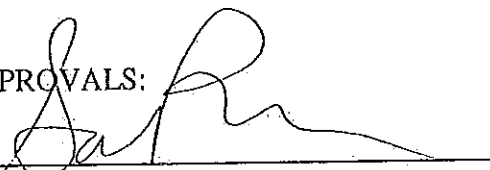
2. Justification for Food Costs: Meals and break items, including service fees, must always be at state rates. Justification must be provided if these costs will exceed state maximums. Additionally, if more than 50% of attendees will be state employees headquartered in the business event city, justification must be provided for any food costs.

Conference registration fees cover all meals for attendees, no state funds are used for meal costs. The state rate maximums were not exceeded with this conference.

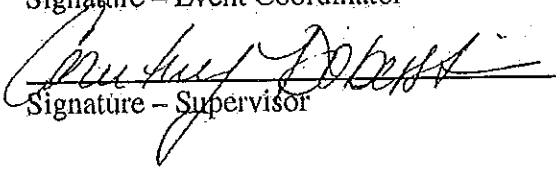
3. Giveaways: If items are to be purchased by DOJ and given to event attendees provide a description of the item, the dollar value of the item, the anticipated total cost, and the name of the vendor from whom the items will be purchased.

450 5.11 travel case @ 10/each plus shipping (unknown)

APPROVALS:


Signature – Event Coordinator

1-7-15
Date


Signature – Supervisor

1/7/15
Date

* If more than 50% of attendees will be state employees and costs will be incurred, approval of the Administrator, Division of Management Services, must be given prior to the business event.

Signature – Administrator, DMS

Date

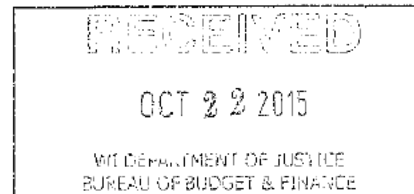
PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll) Lewis, Eva M. Purchasing Card Number (last 4 digits only): XXXX XXXX XXXX [REDACTED]	For Statement Date: 09-25-2015
---	---------------------------------------

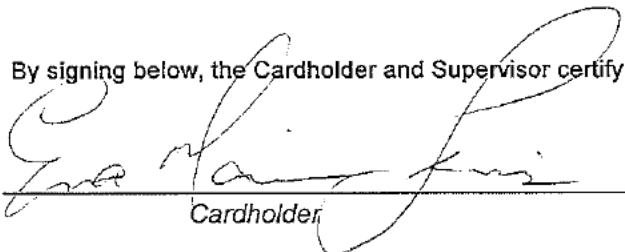
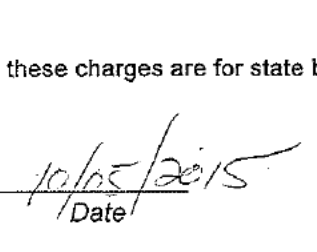
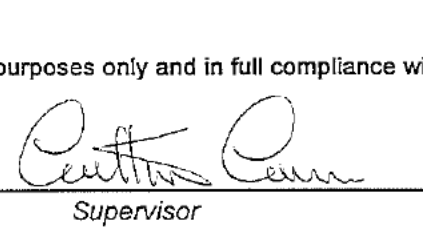
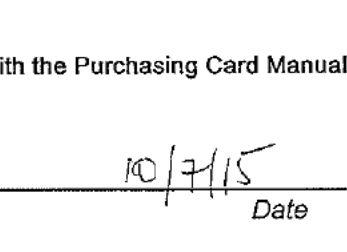
Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory Number for Items \$5,000 or Less
9/14/2015	Crestline	promotional mugs for Bureau events				454.12	

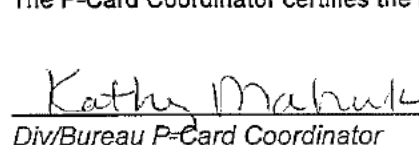
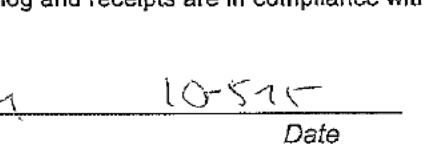
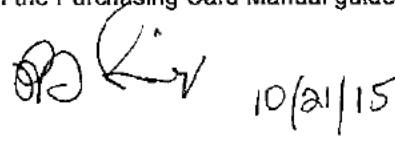
CARD TOTAL \$454.12



By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

 Cardholder	 Date 10/05/2015	 Supervisor	 Date 10/7/15
---	---	---	---

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

 Div/Bureau P-Card Coordinator	 Date 10-5-15	 Date 10/21/15
--	---	---

4-15-16
OK
LP



U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343



ST OF WI - DOJ

STATE OF WISCONSIN
DEPARTMENT OF JUSTICE

2015 OCT -5 12 12:00

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 09-25-15
TOTAL ACTIVITY \$ 454.12

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT

000012085 1 AT 0.416 106481210233940 P

EVA M LEWIS
TAX EX [REDACTED] DNA
STATE CRIME LAB
1578 S 11TH ST
MILWAUKEE WI 53204-2860

Cardholder

Signature _____ Date _____

Approver

Signature _____ Date _____

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
09-15	09-14	CRESTLINE SPECIALTIES 800-285-0318 ME PUR ID: 1169645 TAX: 0.00	24493985258892014201292	5909	454.12

Default Accounting Code: 455MILLAB DNA004

CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER [REDACTED]		ACCOUNT SUMMARY	
	STATEMENT DATE	DISPUTED AMOUNT		
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	09-25-15	\$.00	PREVIOUS BALANCE	\$.00
			PURCHASES & OTHER CHARGES	\$454.12
			CASH ADVANCES	\$.00
			CASH ADVANCE FEE	\$.00
			CREDITS	\$.00
		AMOUNT DUE \$ 0.00 DO NOT REMIT	TOTAL ACTIVITY	\$454.12

CRESTLINE

CUSTOM PROMOTIONAL PRODUCTS

INVOICE

Date: 09/14/15

Please Note Our New Remittance Address

2905233

Page 1 of 1

Account No.	876233	PO No.		Due Date	09/14/15
Order No.	1169645	Order Date	09/01/15	Shipped Via.	UPS - Ground COMMERCIAL

Bill To

STATE OF WISCONSIN
EVA LEWIS
1578 S 11TH ST
MILWAUKEE WI 53204

Ship To

STATE OF WISCONSIN
EVA LEWIS
1578 S 11TH ST
MILWAUKEE WI 53204

Item Number	Item Description	Ship Date	Qty	Unit Price	Amount
109453 01A	TORINO CAFE MUG - 2 DAY SERVIC	09/10/15	151	2.760	416.76
C109453 1AR	FREE 1 COLOR IMPRINT	09/10/15	72		N/C
S109453 1RS	RE-ORDER SETUP CHARGE	09/10/15	1	10.000	10.00

Euf rec'd 09/18/2015

Invoice #2905233

QUESTIONS? Call 1-800-221-7797

Please refer to your Account No. and our Invoice No. / Order No.
in all communications regarding this invoice.

Subtotal	426.76
Sales Tax	0.00
Shipping and Handling	27.36
Total Invoice	454.12
Payment	-454.12
Balance Due	0.00

NEW Remit-To Address

Please Remit Payment To:
Crestline Specialties, Inc.
PO Box 712144
Cincinnati, OH 45271-2144



Accounts past due 30 days and over are subject to a finance charge of 1 1/2% per month,
which is an annual percentage rate of 18% to be applied to the unpaid balance.

Price, Lori A.

From: Price, Lori A.
Sent: Thursday, March 17, 2016 11:18 AM
To: Champion, Jana L.
Cc: Lewis, Eva M.; Varese, Darcey L.
Subject: RE: 9-25-15 Pcard Log--Business Event Authorization Needed

Hi Jana,

The Business Event Authorization is not a new process. According to the BEA policy:

Promotional Items: If items are to be purchased by DOJ and given to event attendees information regarding the item and dollar value must be provided on the BEA form. The PCard must be used to purchase these items when costs are \$5,000 or less.

Also,

A completed BEA form must accompany the purchasing card statement . . .

In this case where the mugs were bought for multiple events, the events can be listed on one BEA. If the events are not exactly known, some indication as to why the mugs are being purchased should be included on the BEA.

Lori

From: Champion, Jana L.
Sent: Thursday, March 10, 2016 8:31 PM
To: Price, Lori A.
Cc: Lewis, Eva M.
Subject: Fwd: 9-25-15 Pcard Log--Business Event Authorization Needed

Lori,

These mugs were purchased as give aways for numerous events as per request of Administrator Brian O'Keefe. We have never filled out a business authorization for mug purchases. Is this something new?

Jana
Sent from my iPad

Begin forwarded message:

From: "Lewis, Eva M." <LewisEM@DOJ.STATE.WI.US>
Date: March 10, 2016 at 3:55:23 PM CST
To: "Champion, Jana L." <championjl@DOJ.STATE.WI.US>
Subject: FW: 9-25-15 Pcard Log--Business Event Authorization Needed

I'll look this up but I haven't had to complete one in the past -- is it new?

Eva Marie

From: Price, Lori A.
Sent: Thursday, March 10, 2016 2:57 PM
To: Lewis, Eva M.
Subject: 9-25-15 Pcard Log--Business Event Authorization Needed

Hi Eva,

For your 9-25-15 p-card log, there is a \$454.12 expense for promotional mugs. Please provide a copy of the approved Business Event Authorization (BEA) that authorizes this purchase. The BEA can be found on JusticeNet in the [forms page](#).

Lori Price
Financial Specialist
Wisconsin Department of Justice
Phone (608) 266-1979
Fax (608) 266-1656
PriceL@doj.state.wi.us

BUSINESS EVENT AUTHORIZATION

(This form must be completed for every business event which will have costs paid by DOJ.)

Name and Purpose of Event: Various meeting during the year (AG's conference/CIB/Sheriff's)Dates/Times: various

City: _____

Sponsoring Division/Bureau: DOJ _____

Coordinator: T&S

Estimated # of Attendees: State Employees (* See below): _____

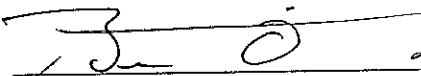
Non-State Employees: _____

1. Justification for site selection: This must be provided if the location of the event will not a state government or university facility when more than 50% of attendees will be state employees.

2. Justification for Food Costs: Meals and break items, including service fees, must always be at state rates. Justification must be provided if these costs will exceed state maximums. Additionally, if more than 50% of attendees will be state employees headquartered in the business event city, justification must be provided for any food costs.

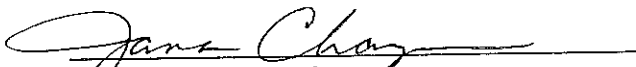
3. Giveaways: If items are to be purchased by DOJ and given to event attendees provide a description of the item, the dollar value of the item, the anticipated total cost, and the name of the vendor from whom the items will be purchased.

Mugs and pins were purchased with the new CLB logo for give away with at various events sponsored by DOJ.

APPROVALS:


Signature – Event Coordinator

Date




Signature – Supervisor

4-11-16

Date

* If more than 50% of attendees will be state employees and costs will be incurred, approval of the Administrator, Division of Management Services, must be given prior to the business event.



Signature – Administrator, DMS

4-11-16

Date

PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll) Donna G Hahn	For Statement Date:9-25-15
Purchasing Card Number (last 4 digits only):	

Receipts are attached in order of occurrence

[illegible]

CARD TOTAL \$797.99

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

Donna J. Hahn 10-9-15
Cardholder Date

33 OK/ 10-15-2015
Supervisor Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

10/21/15
Div/Bureau P-Card Coordinator Date

Upon receipt of your US Bank statement, the purchasing card log must be completed for that statement period.



U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

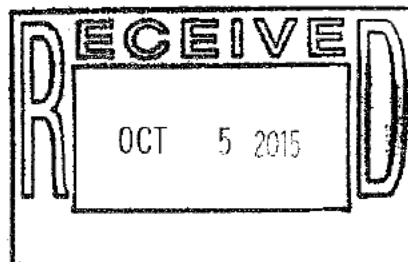
ST OF WI - DOJ

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 09-25-15
TOTAL ACTIVITY \$ 797.99

000006236 1 AV 0.391 106481210228091 P

DONNA G HAHN
TAX [REDACTED]
WI DEPT OF JUSTICE TS
17 W. MAIN ST.
MADISON WI 53703-3960

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT



Cardholder Signature _____ Date _____
Approver Signature _____ Date _____

NEW ACCOUNT ACTIVITY					
POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
09-14	09-11	STAPLS0137834890000001 877-8267755 MI PUR ID: W0013738 TAX: 0.00	24164075254105100118714	5111	42.62
09-15	09-14	WM SUPERCENTER #3505 WISCONSIN DEL WI PUR ID: TAX: 0.00	24445005258400084862070	5411	305.40
09-24	09-23	CLAMCASE 949-2504929 CA PUR ID: 1568861 TAX: 0.00	24755425267132675150879	5732	449.97

Default Accounting Code: 455TS TS017		
CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER [REDACTED]	
	STATEMENT DATE 09-25-15	DISPUTED AMOUNT \$.00
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	AMOUNT DUE \$ 0.00 DO NOT REMIT	
		ACCOUNT SUMMARY
		PREVIOUS BALANCE \$.00
		PURCHASES & OTHER CHARGES \$797.99
		CASH ADVANCES \$.00
		CASH ADVANCE FEE \$.00
		CREDITS \$.00
		TOTAL ACTIVITY \$797.99



Order #	Ship Date	Order Date	Master Number
0137834890-000-001	09/10/2015	09/10/2015	0001817305
Deliver to	Phone #	Ordered by	
DONNA HAHN	608-2665710-55555	HAHNDG@DOJ.STATE.WI.US	
Budget Center	Purchase Order #	Release #	
W0013736	W0013736		

Ship to RISSE: ST OF WI
 17 W MAIN ST
 8TH FLOOR, DLES/BBF
 MADISON, WI 53703

CREDIT CARD RECEIPT

Order Line#	SKU	Product Description	Budget Center	Order UOM	Qty Ord	Qty Ship	Unit Price	Extended Price
1	464050	DURACELL COPPERTOP AA ALKALINE	W0013736	PK	1	1	\$21.47	\$21.47
2	887578	FALCON WIPES OFFICE SHARE PACK	W0013736	PK	1	1	\$21.15	\$21.15





Subtotal	\$42.62
Freight/Misc Charges	\$0.00
Tax	\$0.00

Last 4 Digits of Credit Card:	Amount Paid via Credit Card	\$42.62
-------------------------------	-----------------------------	---------

Order Summary - 66140941

General		Shipping Address	Payment Information	
Business Unit	Justice (45500)	ATTN: Donna Hahn DIVISION/BUREAU DLES/BBF ROOM/FLOOR 8th Floor 17 W MAIN ST Madison, WI 53703 United States	Cardholder Name	Donna G Hahn
Prepared by	Donna Hahn		Card Number	
Internal Attachments			Card Security Code	
Internal Note (Header)	<i>no note</i>		Expiration Date	9/2016
Note to all Suppliers	<i>no note</i>			

Supplier / Line Item Details**Staples Advantage**

Product Description	Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1  Duracell CopperTop AA Alkaline Batteries, 36/Pk 	464050	PK	21.47 USD	1 PK	21.47 USD
Contract: 15-61598-400					
Manufacturer Name	Duracell	Commodity Code	45006	Internal Note	<i>no note</i>
Manufacturer Part Number	MN15P36		Batteries, Dry Cell	(Line)	
Supplier Part Auxiliary ID	464050		(Except Communications Radio and Electronic)		
2  Falcon Wipes Office Share Pack, Disinfecting, 75/PK 	887578	PK	21.15 USD	1 PK	21.15 USD
Contract: 15-61598-400					
Manufacturer Name	Falcon	Commodity Code	20725	Internal Note	<i>no note</i>
Manufacturer Part Number	DODHJ		Cleaners for	(Line)	
Supplier Part Auxiliary ID	887578		Keyboards, Monitors, Tapes, Diskettes, etc.		
Supplier subtotal					42.62USD
Shipping, Handling, and Tax charges are calculated and charged by each supplier. The values shown here are for estimation purposes, budget checking, and workflow approvals.			Subtotal		42.62
			Total		42.62 USD

To reach Customer Service,
please dial (877)826-7755.



Staples Advantage

ST OF WI
DONNA HAHN
17 W MAIN ST
8TH FLOOR, DLES/BBF
MADISON, WI 53703
Contact: (608) 266-5710 EXT. 55555 - DONNA HAHN

ST OF WI SCI DEPT OF JUSTICE
633 W WISCONSIN AVE
STE 803
MILWAUKEE, WI 532031918

REFER TO THIS ORDER NO. FOR ALL INQUIRIES

CUSTOMER NO.	SHIP DATE	ORDER NO.
0001817305	9/10/15	0137834890-000001
PURCHASE ORDER NO.	RELEASE NO.	
W0013736		
COST CENTER	REQUISITIONER	
W0013736		

SHIPPING LOCATION: Beloit, WI FC

CARRIER ROUTE: MD2/UPS /U3

TOTAL PACKAGES: 1

PAGE: 1

SPECIAL INSTRUCTIONS

Line	ITEM NUMBER	ITEM DESCRIPTION / MODEL NUMBER	UNIT OF MEAS	QTY ORDERED	QTY SHIPPED	B/O QTY	Your Price	Extended Amount
1	464050	DURACELL COPPERTOP AA ALKALINE/MN15P36	PK	1	1	0	21.47	21.47
		Material Safety Data Sheets (MSDS) may be found by visiting http://sds.staples.com/msds/464050.pdf						
2	887578	FALCON WIPES OFFICE SHARE PACK/DODHJ	PK	1	1	0	21.15	21.15
		Material Safety Data Sheets (MSDS) may be found by visiting http://sds.staples.com/msds/887578.pdf						
		Merchandise Total.....						42.62
		Delivery.....						.00
		Tax.....						.00



Check your order status online by
selecting My Order Status from the
My Orders drop down.

PAYMENT METHOD:

TOTAL VALUE
OF ORDER: 42.62

BUSINESS EVENT AUTHORIZATION

(This form must be completed for every business event which will have costs paid by DOJ.)

Name and Purpose of Event: 2015 CIB ConferenceDates/Times: Sept 14th-18th 2015City: Wisconsin DellsSponsoring Division/Bureau: DLES/CIBCoordinator: Sara PhelanEstimated # of Attendees: State Employees (* See below): 40Non-State Employees: 350

1. Justification for site selection: This must be provided if the location of the event will not a state government or university facility when more than 50% of attendees will be state employees.

N/A

2. Justification for Food Costs: Meals and break items, including service fees, must always be at state rates. Justification must be provided if these costs will exceed state maximums. Additionally, if more than 50% of attendees will be state employees headquartered in the business event city, justification must be provided for any food costs.

Conference registration fees cover all meals for attendees, no state funds are used for meal costs. The state rate maximums were not exceeded with this conference.

3. Giveaways: If items are to be purchased by DOJ and given to event attendees provide a description of the item, the dollar value of the item, the anticipated total cost, and the name of the vendor from whom the items will be purchased.

450 5.11 travel case @ 10/each plus shipping (unknown)

APPROVALS:

Signature -- Event Coordinator

Date

Signature -- Supervisor

Date

* If more than 50% of attendees will be state employees and costs will be incurred, approval of the Administrator, Division of Management Services, must be given prior to the business event.

Signature -- Administrator, DMS

Date

Price, Lori A.

From: Price, Lori A.
Sent: Thursday, March 10, 2016 1:22 PM
To: Hahn, Donna G.
Subject: 9-25-15 Pcard Log--BEA Needed

Hi Donna,

For your 9-25-16 p-card log, there is a \$305.40 expense for candy purchased as conference supplies. Please provide a copy of the approved Business Event Authorization that authorizes this purchase.

Thank you.

Lori Price
Financial Specialist
Wisconsin Department of Justice
Phone (608) 266-1979
Fax (608) 266-1656
Pricela@doj.state.wi.us

walmart 
Save money. Live better.

(608) 253 - 3490
MANAGER SHANNON SCHERBERT
130 COMMERCE ST
WISCONSIN DELLS WI 53965

ST# 03505	OP# 004556	TER 10	TR# 03295
TWIX	004000015147	F	4.86 0
TOOTSIE ROLL	007172055380	F	4.86 0
TWIX	004000015147	F	4.86 0
COUPON 40000	054000013500	F	2.00-0
REESE MINI H	003400044900	F	3.24 0
MILKY WAY	004000015143	F	4.86 0
MILKY WAY	004000015143	F	4.86 0
COUPON 40000	054000013500	F	2.00-0
STARBURST	002200007371	F	1.98 0
REESE SNACK	003400040211	F	2.68 0
REESE SNACK	003400040211	F	2.68 0
YORK PATTY	003400002063	F	3.24 0
HARVEST	0034000021024	F	3.24 0
KITKAT MINI	003400007610	F	3.24 0
SUGAR CANDY	007920024715	F	19.84 0
SUGAR CANDY	007920024715	F	19.84 0
SUGAR CANDY	007920054477	F	9.94 0
TOOTSIE ROLL	007172055380	F	4.86 0
KITKAT MINI	003400007610	F	3.24 0
HSY TOT BAG	003400099063	F	19.84 0
MARS MX MINI	004000049618	F	14.94 0
ROLO MINI	003400038826	F	3.24 0
REESE MINI H	003400044900	F	3.24 0
KITKAT MINI	003400007610	F	3.24 0
STARBURST	002200007371	F	1.98 0
YORK PATTY	003400002063	F	3.24 0
STARBURST	002200007371	F	1.98 0
MIXED	004000049570	F	9.94 0
PNUT CARAMEL	004000050312	F	14.94 0
MARS MX MINI	004000049618	F	14.94 0
PNUT CARAMEL	004000050312	F	14.94 0
YORK PATTY	003400002063	F	3.24 0
MIXED	004000049570	F	9.94 0
JOLLYRANCHER	001070015671	F	8.98 0
MIXED	004000049570	F	9.94 0
STARBURST	002200007371	F	1.98 0
STARBURST	002200007371	F	1.98 0
REESE SNACK	003400040211	F	2.68 0
REESE SNACK	003400040211	F	2.68 0
REESE MINI H	003400044900	F	3.24 0
SUPER MIX	003400098743	F	9.94 0
SUGAR CANDY	007920054477	F	9.94 0
SUPER MIX	003400098743	F	9.94 0
SUPER MIX	003400098743	F	9.94 0
KITKAT MINI	003400007610	F	3.24 0
ROLO MINI	003400038826	F	3.24 0
REESE MINI H	003400044900	F	3.24 0
ROLO MINI	003400038826	F	3.24 0
ROLO MINI	003400038826	F	3.24 0
SUBTOTAL			305.40
TOTAL			305.40
VISA TEND			305.40

\$

CIB Conf

\$

Heroin Conf.

VISA CREDIT XXXXXXXXXX I 1
APPROVAL # 070782
REF # 1042000314
TRANS ID - 085257851435441
VALIDATION - HMBR
PAYMENT SERVICE - E

AID A000000003101001
TC 202207BC75336F62
TERMINAL # SC011258
*Signature Verified

09/14/15

ORDER CONFIRMATION



Order #: 104035776
Date: Sep 23, 2015

ClamCase, LLC
3341 W Cahuenga Blvd
Los Angeles, California 90068
(888) 882-4440

SOLD TO:

Donna Hahn
Wisconsin Department of Justice
17 West Main Street PO Box 7857
Madison,
Wisconsin, 53707-5857
United States
T: 608-266-5710

SHIP TO:

Donna Hahn
Wisconsin Department of Justice
17 West Main Street 8th Floor DLES
Madison,
Wisconsin, 53707
United States
T: 6082665710

hahndg@doj.state.wi.us

Payment Method

-Credit Card-
Credit Card Type: N/A

Shipping Method

UPS - Ground

Product	SKU	Price	QTY	Tax	Sub Total
ClamCase Pro for iPad Air 2	IPD-263-SMK	\$149.99	3	\$0.00	\$449.97

Order Subtotal: \$449.97

Tax: \$0.00

Grand Total: \$449.97

Packing Slip

ClamCase® online store

6001 Oak Canyon
Irvine, California 92618
1-888-882-4440
<http://clamcase.com/>

Order: 104035776
Placed: 9/23/2015
Shipping: UPS - Ground

Ship To

Donna Hahn
Wisconsin Department Of Justice
17 West Main Street
8th Floor Dles
Madison, Wisconsin 53707
6082665710

Bill To

Donna Hahn
Wisconsin Department Of Justice
17 West Main Street
Po Box 7857
Madison, Wisconsin 53707-5857
608-266-5710
hahndg@doj.state.wi.us

Item #	Name	QTY
IPD-263-SMK	ClamCase Pro for iPad Air 2	3

Order Information

Shipping

Shipped on 9/23/2015 using UPS Ground: 1ZV50W290393902589

Notes

None

Thank you!

Thank you for your purchase from ClamCase® online store!

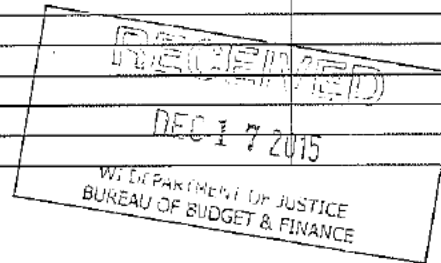
If you have questions about your order please visit us online at <http://clamcase.com/> or email us at support@clamcase.com.

PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll) Sara Phelan	For Statement Date: 10/09/15
Purchasing Card Number (last 4 digits only): [REDACTED]	

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory # for items is \$5,000 or less
9-29	PC Name Tag	Printer supplies -- Heroin Summit				314.64	✓
9-29	National Custom Design	Crime Lab Label Pins				700.00	✓
10-08	PC Name Tag	Printer Supplies				89.00	✓



CARD TOTAL \$1,103.64

I will JR
314.64
89.00
ja

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

Sara Phelan
Cardholder
11/9/15
Date

Steve
Supervisor
11/10/15
Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

[Signature]
Div/Bureau P-Card Coordinator
12/16/15
Date

Upon receipt of your US Bank statement, the purchasing card log must be completed for that statement period.

Cardholder is responsible to obtain a receipt for all purchases and credits.

Instructions to complete Purchasing Card Log

1. Complete your name and the last four (4) digits of your card at the top left section of the form.

4-15-16
OK UP



U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

ST OF WI - DOJ

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 10-09-15
TOTAL ACTIVITY \$ 1,103.64

000001360 1 AV 0.391 106481227485632 P

SARA PHELAN
TAX [REDACTED]
DEPT OF JUSTICE CIB
17 W MAIN ST
MADISON WI 53703-3960

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT

Cardholder Signature _____ Date _____
Approver Signature _____ Date _____

NEW ACCOUNT ACTIVITY					
POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
09-30	09-29	PC NAME TAG 8002064804 WI PUR ID: 2700000185 TAX: 0.00	24761975272200739700671	5943	314.64
10-01	09-29	NATIONAL CUSTOM INSIGN 800-7818806 FL PUR ID: 44512 TAX: 0.00	24254775273473830272034	2741	700.00
10-09	10-08	PC NAME TAG 800-206-4804 WI PUR ID: 1800033654 TAX: 0.00	24761975281200739401402	5943	89.00

Default Accounting Code: 455TS TS028			
CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER [REDACTED]		ACCOUNT SUMMARY
	STATEMENT DATE 10-09-15	DISPUTED AMOUNT \$.00	PREVIOUS BALANCE \$.00
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 8335 FARGO, ND 58125-6335	AMOUNT DUE \$ 0.00 DO NOT REMIT		PURCHASES & OTHER CHARGES \$1,103.64
			CASH ADVANCES \$.00
			CASH ADVANCE FEE \$.00
			CREDITS \$.00
			TOTAL ACTIVITY \$1,103.64

pc/nametag®**INVOICE****pc/nametag, Inc.**

PO Box 667

Racine, WI 53401

Phone No. 1-800-369-8106

Fax No. 1-608-845-1866

E-mail accounting@pcnametag.com

EIN 391363853

GST/HST Registration number 82953 7745 RT0001

Invoice No : 15710666		
Invoice Date: 9/29/2015	Due Date: 9/29/2015	Terms: Credit Card
Contact No 33538796	Sell-To Contact Name Donna Hahn	
Your Ref No.	Customer Phone: 6082671319	Customer Fax: 6082649477

To place a new order call Sales at 800-233-9767

Bill To: WI Dept of Justice
Donna Hahn
17 W Main St
8th Fl
MADISON, WI 53703
USA

Ship To: WI Dept of Justice
Donna Hahn
17 W Main St
4th Fl
MADISON, WI 53703
USA

Carrier	Service GROUND SERVICE	Order Date 9/8/2015	Our Order No. 12505826	PO No.	Ship Date 9/8/2015	Sales Person Angela Koshman
---------	------------------------------	------------------------	---------------------------	--------	-----------------------	--------------------------------

Item/Description	Unit	Qty	Unit Price	Disc. %	Total Price
UEPRIBBONBC Primacy Black & Color Ribbon 200 Prints Per Ribbon	Each	4.00	75.00		300.00
FREIGHT Freight Charges Quoted	Each	1.00	14.64		14.64
Ground shipping is estimated 1 Business Day					

Applied Entries:

Payment CC00165885 09/29/2015 0 -314.64

ACH Info:	Johnson Bank, Madison WI USA	Subtotal:	314.64
	ABA Domestic Routing Number:	Invoice	0.00
	Final Credit To: pc/nametag, Inc.	Discount:	
	Checking Account Number:	Tax:	0.00
			0.00
		Total:	314.64
		Less Applied:	-314.64
		Total Due:	0.00

*If you'd like to establish a credit account
with us for future orders, please call*

1.800.369.8106

Thank you for your business.

Visit us on-line at:

www.pcnametag.com

Orders may ship from more than one location. pc/nametag will send one invoice for each separate shipment.

Products manufactured and distributed by pc/nametag are NOT designed or intended for use by children 12 years of age or under.

National Custom Insignia, Inc.

P.O. Box 1190
Oldsmar, FL 34677-1190

Phone: (727) 781-8806

Order

Invoice #: 00044512

Bill To:

Wisconsin Department of Justice
Attn: Sara Phelan
17 W. Main St.
Madison, WI 53703

Ship To:

Wisconsin Department of Justice
Attn: Sara Phelan
17 W. Main St.
Madison, WI 53703 USA
608-264-6364

SALESPERSON		YOUR NO.	SHIP VIA	COL	PPD	SHIP DATE	TERMS		DATE	PG.
			FedEx		X		Prepaid		9/29/15	1
QTY.	ITEM NO.	DESCRIPTION			PRICE		UNIT	DISC %	EXTENDED	TX.
500	CL500	CLOISONNE LAPEL PIN WISCONSIN STATE			\$1.40		EACH		\$700.00	
Payment was charged to your Visa Card							Sale Amt.:		\$700.00	
							Freight:		\$0.00	
							Sales Tax:		\$0.00	
							Total Amt.:		\$700.00	
							Paid Today:		\$700.00	
							Balance Due:		\$0.00	

pc/nametag®**INVOICE****pc/nametag, Inc.**

GST/HST Registration number 82953 7745 RT0001

PO Box 667

Racine, WI 53401

Phone No. 1-800-369-8106

Fax No. 1-608-845-1866

E-mail accounting@pcnametag.com

EIN 391363853

Invoice No : 15713555		
Invoice Date: 10/8/2015	Due Date: 10/8/2015	Terms: Credit Card
Contact No 33431573	Sell-To Contact Name Sara Phelan	
Your Ref No.	Customer Phone: 6082667955	Customer Fax:

To place a new order call Sales at 800-233-9767

Bill To: WI Department of Justice
Sara Phelan
17 West Main Street
PO Box 2718
Madison, WI 53701
USA

Ship To: WI Department of Justice
Sara Phelan
17 West Main Street
PO Box 2718
Madison, WI 53701
USA

Carrier FOB ORIGIN	Service WILL. CALL	Order Date 10/8/2015	Our Order No. 12510369	PO No.	Ship Date 10/8/2015	Sales Person Michelle Brummel
------------------------------	---------------------------------	--------------------------------	----------------------------------	---------------	-------------------------------	---

Item/Description	Unit	Qty	Unit Price	Disc. %	Total Price
UCR80 CR80 PVC Cards 500/Pack	Each	1.00	40.00		40.00
LPUNS Staple Style Slot Punch	Each	1.00	46.00		46.00
HANDLING Processing Fee-3rd Party Acct may delay tracking	Each	1.00	3.00		3.00

Applied Entries:

Payment	CC0167076	10/08/2015	0	-89.00
---------	-----------	------------	---	--------

ACH Info:	Johnson Bank, Madison WI USA	Subtotal:	89.00
	ABA Domestic Routing Number:	Invoice	0.00
	Final Credit To: pc/nametag, Inc.	Discount:	
	Checking Account Number:	Tax:	0.00
			0.00
		Total:	89.00
		Less Applied:	-89.00
		Total Due:	0.00

If you'd like to establish a credit account

with us for future orders, please call

1.800.369.8106

Thank you for your business.

Visit us on-line at:

www.pcnametag.com

Orders may ship from more than one location. pc/nametag will send one invoice for each separate shipment.

Products manufactured and distributed by pc/nametag are NOT designed or intended for use by children 12 years of age or under.

Price, Lori A.

From: Price, Lori A.
Sent: Friday, April 01, 2016 3:23 PM
To: Phelan, Sara M.
Subject: 10-6-15 Pcard Log--Lapel Pins Purchase

Hi Sara,

For your 10-6-15 P-card log, please supply a business reason for the \$700 lapel pins purchase.

Lori Price
Financial Specialist
Wisconsin Department of Justice
Phone (608) 266-1979
Fax (608) 266-1656
Pricela@doj.state.wi.us

BUSINESS EVENT AUTHORIZATION

(This form must be completed for every business event which will have costs paid by DOJ.)

Name and Purpose of Event: Various meeting during the year (AG's conference/CIB/Sheriff's)Dates/Times: various

City: _____

Sponsoring Division/Bureau: DOJ _____

Coordinator: T&S

Estimated # of Attendees: State Employees (* See below): _____

Non-State Employees: _____

1. Justification for site selection: This must be provided if the location of the event will not a state government or university facility when more than 50% of attendees will be state employees.

2. Justification for Food Costs: Meals and break items, including service fees, must always be at state rates. Justification must be provided if these costs will exceed state maximums. Additionally, if more than 50% of attendees will be state employees headquartered in the business event city, justification must be provided for any food costs.

3. Giveaways: If items are to be purchased by DOJ and given to event attendees provide a description of the item, the dollar value of the item, the anticipated total cost, and the name of the vendor from whom the items will be purchased.

Mugs and pins were purchased with the new CLB logo for give away with at various events sponsored by DOJ.

APPROVALS:

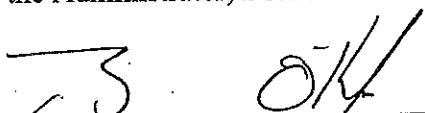
 SARA P. H. H.
Signature – Event Coordinator

Date


Signature – Supervisor

Date

* If more than 50% of attendees will be state employees and costs will be incurred, approval of the Administrator, Division of Management Services, must be given prior to the business event.

 OK
Signature – Administrator, DMS OKS

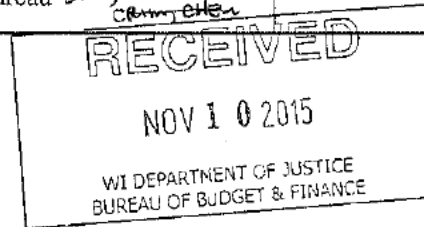
Date

PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll) Lewis, Eva M.	For Statement Date: 10-09-2015
Purchasing Card Number (last 4 digits only): XXXX XXXX XXXX [REDACTED]	

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory Number for Items \$5,000 or Less
9/28/2015	Amazon.com	two reference books <i>lab / Criminalistics</i>				194.66 ✓	
9/28/2015	The Home Depot	shelf + bracket for KMR bench				16.96 ✓	
9/29/2015	Badger State Industries	<i>three</i> two chairs <i>KMR, JLK, Em L</i>				1,495.03 ✓	
10/2/2015	Crestline	promo mugs for the Bureau <i>BRO, BUREAU, Daily CRIM, etc</i>				837.66 ✓	



CARD TOTAL

\$2,544.31



By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

Eva M. Lewis 10/20/2015
Cardholder Date

Centina Penn 10/23/15
Supervisor Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

Kathy Mahala 10-16-2015 [Signature] 11/9/15
Div/Bureau P-Card Coordinator Date

4-15-16
OK
4



U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

ST OF WI - DOJ

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 10-09-15
TOTAL ACTIVITY \$ 2,544.31

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT

000003054 1 AT 0.416 106481227487326 P

EVA M LEWIS
TAX EX [REDACTED] DNA
STATE CRIME LAB
1578 S 11TH ST
MILWAUKEE WI 53204-2860

2015 OCT 16 AM 11

Cardholder

Signature _____ Date _____

Approver

Signature _____ Date _____

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
09-30	09-28	THE HOME DEPOT #4941 MILWAUKEE WI PUR ID: STATE OF WISCONSI TAX: 0.00	24610435272010187467196	5200	16.96
10-05	10-03	AMAZON.COM AMZN.COM/BILL WA PUR ID: 115-2645236-36538 TAX: 0.00	24692165276000196067384	5942	194.66
10-07	10-06	CRESTLINE SPECIALTIES 800-285-0318 ME PUR ID: 1192599 TAX: 0.00	24493985280892015801894	5999	837.66
10-09	10-01	BADGER STATE INDUSTRIES 651-4594148 WI PUR ID: 8031 TAX: 0.00	24717055281172814293200	9399	1,495.03

Default Accounting Code: 455MILLAB DNA004

Default Accounting Code: 455MILLAB DNA004			
CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER		ACCOUNT SUMMARY
	<div></div>		PREVIOUS BALANCE \$.00
	STATEMENT DATE	DISPUTED AMOUNT	PURCHASES & OTHER CHARGES \$2,544.31
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	10-09-15	\$.00	CASH ADVANCES \$.00
	AMOUNT DUE \$ 0.00 DO NOT REMIT		CASH ADVANCE FEE \$.00
			CREDITS \$.00
			TOTAL ACTIVITY \$2,544.31

Mahnke, Kathy A.

From: Lewis, Eva M.
Sent: Monday, September 28, 2015 4:55 PM
To: Mahnke, Kathy A.
Cc: Cowie, Carlton
Subject: FW: Your Amazon.com order of Criminalistics: An... and 1 more item.

Here is the order confirmation for the updated Crime Lab editions of Saferstein's Criminalistics: An Introduction of Forensic Science. Justification: We had an 8th edition and the old 6th edition on-site (they both must be at someone's desk because both are not currently in Library). We've never updated to the 9th and 10th editions; however, I'm aware that the 11th edition came out last year so I think it's time the lab copy with the accompanying "lab manual" is updated for on-site use by the Staff.

(Carlton, I wanted the most up-to-date presented information to refer to prior to going to the November presentation I agreed to do for the Lab at UWM per the email I responded to today that you forwarded to me from Jana and Anne Schwartz earlier)

Eva Marie

From: auto-confirm@amazon.com [mailto:auto-confirm@amazon.com]
Sent: Monday, September 28, 2015 4:39 PM
To: Lewis, Eva M.
Subject: Your Amazon.com order of Criminalistics: An... and 1 more item.



Order Confirmation

Hello Eva Marie Lewis,
Thank you for shopping with us. You ordered "Criminalistics: An..." and 1 other item. We'll send a confirmation when your items ship.

Details

Order #115-2645236-3653850

Estimated delivery date:
Monday, October 5, 2015 -
Thursday, October 8, 2015

[View or manage order](#)

Ship to:
Eva Marie Lewis
Wisconsin State Crime
Laboratory - Milwaukee...

Total Before Tax: \$194.66
Estimated Tax: \$0.00
Order Total: \$194.66

We hope to see you again soon.
Amazon.com

Recommended for You Based on Lab Manual for Cr...



CHEM 2: Chemistry in
Your World

\$70.26 *Prime*



Applied Calculus for the
Life and...

\$258.38 *Prime*

By placing your order, you agree to Amazon.com's Privacy Notice and Conditions of Use. Unless otherwise noted, items sold by Amazon.com LLC are subject to sales tax in select states in accordance with the applicable laws of that state. If your order contains one or more items from a seller other than Amazon.com LLC, it may be subject to state and local sales tax, depending upon the seller's business policies and the location of their operations. Learn more about tax and seller information.

This email was sent from a notification-only address that cannot accept incoming email. Please do not reply to this message.

amazon.com



SDSCyJwDk

Your order of September 28, 2015 (Order ID 115-2645236-3653850)

Qty.	Item	Item Price	Total
1	Lab Manual for Criminalistics: An Introduction to Forensic Science Safferstein, Richard --- Paperback (** P-9-A213E166 **) 013345889X	\$44.05	\$44.05
1	Criminalistics: An Introduction to Forensic Science (11th Edition) Safferstein, Richard --- Paperback (** P-9-A188E495 **) 0133458822 000133458822	\$150.61	\$150.61

This shipment completes your order.

Have feedback on how we
packaged your order? Tell us at
www.amazon.com/packaging.

Return or replace your item
Visit Amazon.com/returns

Subtotal \$194.66
Shipping & Handling \$4.98
Promotional Certificate \$-4.98
Order Total \$194.66
Paid via credit/debit \$194.66
Balance due \$0.00

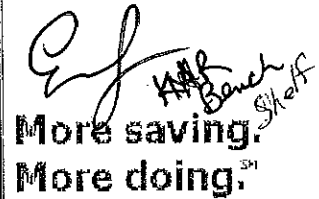
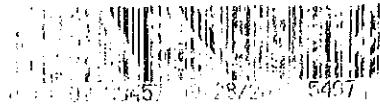
Rec'd 10/05/15



32/DSCyJwDk/-2 of 2-/MKES/sss-us/3781229/1003-03:00/1002-02:33

V4

Shelf + bracket
for DNA -

[illegible]

FORM POLICY

DAYS

90

POLICE RESERVE

RETURNED TO SENDER SELECT

IN STORES

OCT 8

WANT TO PICK-UP IN SEPT.
CALL US NOW ON HOMEPOL.COM.
WE GET, LAST AND LOST ORDERS
AND DELIVER IN LESS THAN 2 HOURS!

SENTECE AFTER A CHANGE
IN THE LAW
OF THE DISTRICT OF COLUMBIA



INVOICE

BSI UPHOLSTERY SHOP

INVOICE NUMBER: 265504

INVOICE DATE : 09/30/15

Web Site: www.BuyBSI.com

PHONE: 608.240.5200

FAX: 608.240.3321

PAGE 1 IN WI: 800.862.1086

BILL TO:
DOJ/STATE CRIME LAB-MILW

30022

1578 S 11TH STREET
MILWAUKEE WI 53204

SHIP TO:
DOJ/STATE CRIME LAB-MILW
EVA LEWIS
1578 S 11TH ST
MILWAUKEE WI 53204

WEB SALES ORDER NBR : 151369
CUSTOMER ORDER NUMBER : PCARD
CUSTOMER ORDER DATE : 09/02/15
REPRESENTATIVE : 934
OPEN ORDER BALANCE : 0.00

SHIPPING DATE : 09/29/15
SHIPPING METHOD: IDC
FOB : DOCK
TERMS : NET 30

ITM PART NUMBER DESCRIPTION	LST PRICE DISCOUNT NET PRICE	SALES INVOICE ORDER	QTY	SHIP/HND CHARGE	INSTALL CHARGE	EXT PRICE
1 LXO-SC	893.00 0.56% 392.92	379145 265504	2	39.29	0.00	785.84
LXO SOFT CASTER						
INST: Mystic C2 Dark Grey						
2 CXO-X-BL-CC	1450.00 0.56% 638.00	379145 265504	1	31.90	0.00	638.00
CXO ERGONOMIC CHAIR NO HEADREST BLACK BASE CARPET						
INST: Mystic C2 Dark Grey						
				SUBTOTAL		1423.84
				SHIPPING		71.19
				INSTALLATION		0.00
						0.00
				TOTAL		1495.03

PAID WITH P CARD

Eva Lewis 414-382-7500

DEPARTMENT OF CORRECTIONS Division of Adult Institutions DOC-1245A(Rev.06/93)
(This Invoice will be processed against your credit card) For Info Call: (608) 240-5200 \ (800) 8

Badger State Industries

P.O. Box 8000 Madison WI 53708

Showroom and Business Office
3099 E. Washington Ave. Madison WI 53704

BUREAU OF CORRECTIONAL ENTERPRISES
3099 E. Washington
PO BOX 8990
MADISON, WI 53708
608-240-5200

BUREAU OF CORRECTIONAL ENTERPR

Date: 10/01/2015 01:02:59 PM

CREDIT CARD SALE

VISA
CARD NUMBER: ***** K
TRAN AMOUNT: \$1,495.03
APPROVAL CD: 077728
RECORD #: 000
CLERK ID: 555050
CUST CODE: 8031
SALES TAX: \$0.00
INVOICE #: 265504

Thank you!

Customer Copy

PAID WITH P CARD

RECEIVED
WI DEPT OF JUSTICE
2015 OCT -9 A 11:24

CRESTLINE

CUSTOM PROMOTIONAL PRODUCTS

INVOICE
Date: 10/06/15

Please Note Our New Remittance Address

2921644
Page 1 of 1

Account No.	876233	PO No.		Due Date	10/06/15
Order No.	1192599	Order Date	10/02/15	Shipped Via.	UPS - Ground COMMERCIAL

Bill To

STATE OF WISCONSIN
EVA LEWIS
1578 S 11TH ST
MILWAUKEE WI 53204

Ship To

STATE OF WISCONSIN
EVA LEWIS
1578 S 11TH ST
MILWAUKEE WI 53204

Item Number	Item Description	Ship Date	Qty	Unit Price	Amount
109453 01A	TORINO CAFE MUG - 2 DAY SERVIC	10/05/15	302	2.650	800.30
C109453 1AR	FREE 1 COLOR IMPRINT	10/05/15	72		N/C
S109453 1RS	RE-ORDER SETUP CHARGE	10/05/15	1	10.000	10.00

Invoice #2921644

QUESTIONS? Call 1-800-221-7797

Please refer to your Account No. and our Invoice No. / Order No.
In all communications regarding this invoice.

Subtotal	810.30
Sales Tax	0.00
Shipping and Handling	27.36
Total Invoice	837.66
Payment	-837.66
Balance Due	0.00

***NEW* Remit-To Address**

Please Remit Payment To:
Crestline Specialties, Inc.
PO Box 712144
Cincinnati, OH 45271-2144



Accounts past due 30 days and over are subject to a finance charge of 1 1/2% per month,
which is an annual percentage rate of 18% to be applied to the unpaid balance.

Price, Lori A.

From: Price, Lori A.
Sent: Thursday, March 31, 2016 3:40 PM
To: Lewis, Eva M.
Subject: 10-9-15 Pcard Log--BEA Needed

Hi Eva,

For your 10-9-15 p-card log, there is a \$837.66 payment listed for promotional mugs. Please send me a copy of the approved Business Event Authorization form that authorizes purchase of these mugs. If you need further information on the BEA, please reference the BEA policy.

Thank you.

Lori Price
Financial Specialist
Wisconsin Department of Justice
Phone (608) 266-1979
Fax (608) 266-1656
Pricela@doj.state.wi.us

Price, Lori A.

From: Price, Lori A.
Sent: Thursday, March 17, 2016 11:18 AM
To: Champion, Jana L.
Cc: Lewis, Eva M.; Varese, Darcey L.
Subject: RE: 9-25-15 Pcard Log--Business Event Authorization Needed

Hi Jana,

The Business Event Authorization is not a new process. According to the BEA policy:

Promotional Items: If items are to be purchased by DOJ and given to event attendees information regarding the item and dollar value must be provided on the BEA form. The PCard must be used to purchase these items when costs are \$5,000 or less.

Also,

A completed BEA form must accompany the purchasing card statement . . .

In this case where the mugs were bought for multiple events, the events can be listed on one BEA. If the events are not exactly known, some indication as to why the mugs are being purchased should be included on the BEA.

Lori

From: Champion, Jana L.
Sent: Thursday, March 10, 2016 8:31 PM
To: Price, Lori A.
Cc: Lewis, Eva M.
Subject: Fwd: 9-25-15 Pcard Log--Business Event Authorization Needed

Lori,

These mugs were purchased as give aways for numerous events as per request of Administrator Brian O'Keefe. We have never filled out a business authorization for mug purchases. Is this something new?

Jana
Sent from my iPad

Begin forwarded message:

From: "Lewis, Eva M." <LewisEM@DOJ.STATE.WI.US>
Date: March 10, 2016 at 3:55:23 PM CST
To: "Champion, Jana L." <championjl@DOJ.STATE.WI.US>
Subject: FW: 9-25-15 Pcard Log--Business Event Authorization Needed

I'll look this up but I haven't had to complete one in the past – is it new?

Eva Marie

From: Price, Lori A.
Sent: Thursday, March 10, 2016 2:57 PM
To: Lewis, Eva M.
Subject: 9-25-15 Pcard Log--Business Event Authorization Needed

Hi Eva,

For your 9-25-15 p-card log, there is a \$454.12 expense for promotional mugs. Please provide a copy of the approved Business Event Authorization (BEA) that authorizes this purchase. The BEA can be found on JusticeNet in the [forms page](#).

Lori Price
Financial Specialist
Wisconsin Department of Justice
Phone (608) 266-1979
Fax (608) 266-1656
Pricela@doj.state.wi.us

BUSINESS EVENT AUTHORIZATION

(This form must be completed for every business event which will have costs paid by DOJ.)

Name and Purpose of Event: Various meeting during the year (AG's conference/CIB/Sheriff's)

Dates/Times: various City: _____

Sponsoring Division/Bureau: DOJ _____ Coordinator: T&S

Estimated # of Attendees: State Employees (* See below): _____

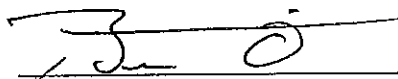
Non-State Employees: _____

1. Justification for site selection: This must be provided if the location of the event will not a state government or university facility when more than 50% of attendees will be state employees.

2. Justification for Food Costs: Meals and break items, including service fees, must always be at state rates. Justification must be provided if these costs will exceed state maximums. Additionally, if more than 50% of attendees will be state employees headquartered in the business event city, justification must be provided for any food costs.

3. Giveaways: If items are to be purchased by DOJ and given to event attendees provide a description of the item, the dollar value of the item, the anticipated total cost, and the name of the vendor from whom the items will be purchased.
Mugs and pins were purchased with the new CLB logo for give away with at various events sponsored by DOJ.

APPROVALS:

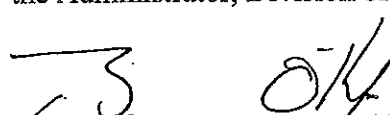
 SARA PHELAN
Signature – Event Coordinator

Date


Signature – Supervisor

4-11-16
Date

* If more than 50% of attendees will be state employees and costs will be incurred, approval of the Administrator, Division of Management Services, must be given prior to the business event.

 OK
Signature – Administrator, DMS OKS

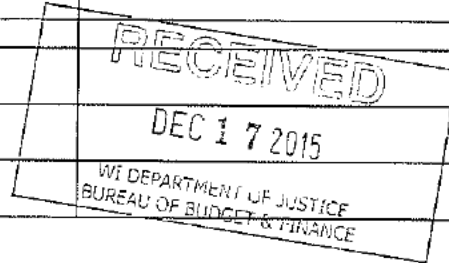
4-11-16
Date

PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll) Renee G. Lushaj	For Statement Date: 10/23/15
Purchasing Card Number (last 4 digits only): [REDACTED]	

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased. For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory Number for items is \$5,000 or less
10/14/15	Shopko/Wisconsin Rapids	Candy for Treatment Court Standards Training				11.99 ✓	



CARD TOTAL \$11.99

I will OK -
ja

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

Renee Lushaj 11/3/15
Cardholder Date

[Signature] 11/4/15
Supervisor Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

[Signature] 12/16/15
Div/Bureau P-Card Coordinator Date

Upon receipt of your US Bank statement, the purchasing card log must be completed for that statement period.

Cardholder is responsible to obtain a receipt for all purchases and credits.

4-26-16
Su
UP



ST OF WI - DOJ

15

U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 10-23-15
TOTAL ACTIVITY \$ 11.99

000001786 1 AV 0.391 106481244229619 P

RENEE G LUSHAJ
TAX [REDACTED]
DEPT OF JUSTICE-TS
17 W MAIN ST 8TH FLR
MADISON WI 53703-3960

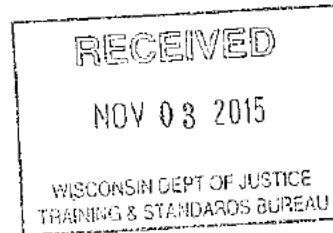
"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT

ation or

Cardholder Signature _____ Date _____
Approver Signature _____ Date _____

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
10-15	10-14	SHOPKO 12 00100123 WISCONSIN RAP WI PUR ID: 0000000000 TAX: 0.00	24164075287564060002337	5310	11.99



Default Accounting Code: 455TS TS029

CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER <div></div>		ACCOUNT SUMMARY	
	STATEMENT DATE 10-23-15	DISPUTED AMOUNT \$.00	PREVIOUS BALANCE	\$.00
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	AMOUNT DUE \$ 0.00 DO NOT REMIT		PURCHASES & OTHER CHARGES	\$11.99
			CASH ADVANCES	\$.00
			CASH ADVANCE FEE	\$.00
			CREDITS	\$.00
			TOTAL ACTIVITY	\$11.99

Concerns &

SHOPKO

SHOPKO WISCONSIN RAPIDS
1100 EAST RIVERVIEW EXPRESSWAY
WISCONSIN RAPIDS, WI 544945483
(715) 423-3100

028000187859 NESTLE MINIS A 11 11 15

SubTotal 11.29
TOTAL 11.29

VISA 11.29

Card number: [REDACTED]
Authorization 070421

Tax Exempt ID:
406

GET \$10 CASH REWARDS

It's free & easy! Ask us or
see shopkocashgrab.com for details.

Store: 0012 Register: 00007 Tran: 0493
236948 10/14/2015 5:49:42 PM

TAKE AN ON-LINE SURVEY AND ENTER
TO WIN A \$250 SHOPPING SPREE AT
www.shopko.com/crsurvey

SAVE YOUR RECEIPT FOR ALL RETURNS.
ASK OUR CUSTOMER SERVICE DESK OR
VISIT www.shopko.com FOR DETAILS.



Binder section 8

11:00 – 11:15a Standard 8:
11:15 – 11:45a Standard 6:

11:45a – 12:00p

12:00 – 1:00p Lunch

ment Court Standards Training - 2015

.....

Day 1: Wednesday (1:00 – 5:00pm)

roductions (30 min)

ommitment to Evidence-Based Practices (45 min)
qual Treatment of People who have Experienced Discrimination or
duced Social Opportunities (20 min)
lanning Process (25 min)

breakout 1 for Standards 1, 2 & 3 (20 min)

Confidentiality (25 min)
Recordkeeping (45 min)

breakout 2 for Standards 9 & 7 (15 min)

Day 2: Thursday (8:00am – 4:30pm)

Referral & Eligibility (30 min)
Screening & Assessment (30 min)

Breakout 3 for Standards 12 & 13 (30 min)

Teams (25 min)
Judicial Interaction/Role (30 min)

Breakout 4 for Standards 4 & 5 (20 min)

Training (15 min)
Balancing the Non-Adversarial Approach with Due Process Concerns &
Community Safety (30 min)

Breakout 5 for Standards 6 & 8 (15 min)

WI Treatment Court Standards Training - 2015

.....

Day 1: Wednesday (1:00 – 5:00pm)

Binder sections 1-3

1:00 – 1:30p Welcome and Introductions (30 min)

Binder section 4

1:30 – 2:15p Standard 1: Commitment to Evidence-Based Practices (45 min)
2:15 – 2:35p Standard 2: Equal Treatment of People who have Experienced Discrimination or
Reduced Social Opportunities (20 min)
2:35 – 3:00p Standard 3: Planning Process (25 min)
3:00p Break
3:15 – 3:35p Breakout 1 for Standards 1, 2 & 3 (20 min)

Binder section 5

3:35 – 4:00p Standard 9: Confidentiality (25 min)
4:00 – 4:45p Standard 7: Recordkeeping (45 min)
4:45 – 5:00p Breakout 2 for Standards 9 & 7 (15 min)

Day 2: Thursday (8:00am – 4:30pm)

Binder section 6

8:00 – 8:30a Standard 12: Referral & Eligibility (30 min)
8:30 – 9:00a Standard 13: Screening & Assessment (30 min)
9:00 – 9:30a Breakout 3 for Standards 12 & 13 (30 min)
9:30a Break

Binder section 7

9:45 – 10:10a Standard 4: Teams (25 min)
10:10 – 10:40a Standard 5: Judicial Interaction/Role (30 min)
10:40 – 11:00a Breakout 4 for Standards 4 & 5 (20 min)

Binder section 8

11:00 – 11:15a Standard 8: Training (15 min)
11:15 – 11:45a Standard 6: Balancing the Non-Adversarial Approach with Due Process Concerns &
Community Safety (30 min)
11:45a – 12:00p Breakout 5 for Standards 6 & 8 (15 min)
12:00 – 1:00p Lunch

WI Treatment Court Standards Training - 2015

.....

Binder section 9

1:00 – 1:45p Standard 14: Treatment (45 min)
1:45 – 2:15p Standard 16: Case Planning (30 min)

2:15 – 2:30p Breakout 6 for Standards 14 & 16 (15 min)

2:30p Break

Binder section 10

2:45 – 3:15p Standard 15: Monitor w/ Drug Testing (30 min)
3:15 – 4:00p Standard 17: Incentives & Sanctions (45 min)

4:00 – 4:30p Breakout 7 for Standards 15 & 17 (30 min)

Day 3: Friday (8:00am – 4:30pm)

Binder section 11

8:00 – 8:30a Standard 10: Community Outreach (30 min)
8:30 – 9:15a Standard 11: Evaluation of Treatment Courts (45 min)

9:15 – 9:30a Breakout 8 for Standards 10 & 11 (15 min)

Performance Measures

Binder section 12

9:30 – 9:45a Project Background, Introduction to Performance Measurement and Management Concepts (15 min)

9:45-10:00a Break

10:00 – 10:45a Introduction to Performance Measurement and Management Concepts cont. (45 min)

10:45 – 11:45a Scenario 1 (60 min)

11:45a – 12:45p Lunch

12:45 – 1:45p Scenario 2 (60 min)

1:45p Break

2:00 – 3:00p Scenario 3 (60 min)

3:00-4:00p Scenario 4 (60 min)

4:00 – 4:15p Performance Measures: Breakout Session: Final Action Planning (15 min)

4:15 – 4:30p Treatment Court Standards Program Wrap-up

Price, Lori A.

From: Lushaj, Renee G
Sent: Wednesday, April 20, 2016 10:49 AM
To: Price, Lori A.
Subject: RE: 10-23-15 Pcard Log--BEA Needed
Attachments: WI Treatment Court Standards Training 9.9.15-10.30.15.pdf; WI Rapids Sign-in Sheet - Day 1.pdf; WI Rapids Sign-in Sheet - Day 2.pdf; WI Rapids Sign-in Sheet - Day 3.pdf

Hi Lori,

Here is the BEA for the 6 events we held. This charge was on 10/14 when I was at the Wisconsin Rapids event, which is page 4 of this document.

I have also attached the attendee sign-in sheet for the three days we held this event.

Thanks,

Reneé

Reneé Lushaj

Justice System Improvement Specialist
Wisconsin Department of Justice
Justice Programs Section
Ph: 608-266-7864
lushajrg@doj.state.wi.us | [CJCC Website](#)

From: Price, Lori A.
Sent: Tuesday, April 19, 2016 3:26 PM
To: Lushaj, Renee G <lushajrg@doj.state.wi.us>
Subject: 10-23-15 Pcard Log--BEA Needed

Hi Renee,

For your 10-23-15 p-card log, please send me a copy of the approved Business Event Authorization for the \$11.99 candy purchase for the Treatment Court Standards Training. A BEA is needed when food items are considered a break item or a giveaway. I already have a copy of the agenda outline, but I will also need a copy of the participant list for the training where the candy was handed out.

Thank you.

Lori Price
Financial Specialist
Wisconsin Department of Justice
Phone (608) 266-1979
Fax (608) 266-1656
Pricela@doj.state.wi.us

BUSINESS EVENT AUTHORIZATION

(This form must be completed for every business event which will have costs paid by DOJ.)

Name and Purpose of Event: Wisconsin Treatment Court Standards Training

Dates/Times: 10/14/15 1:00am-5:00pm 10/15/15 8:00am-4:30pm 10/16/15 8:00am-4:30pm

City: Wisconsin Rapids, WI

Sponsoring Division/Bureau: Training and Standards

Coordinator: Reneé Lushaj

Estimated # of Attendees: State Employees (* See below): 10

Non-State Employees: 78

Bureau Staff Attending: Matt Raymer, Reneé Lushaj, Andrea Waters

1. Justification for site selection: This must be provided if the location of the event will not a state government or university facility when more than 50% of attendees will be state employees.

2. Justification for Food Costs: Meals and break items, including service fees, must always be at state rates. Justification must be provided if these costs will exceed state maximums. Additionally, if more than 50% of attendees will be state employees headquartered in the business event city, justification must be provided for any food costs. We will be providing water and coffee to the attendees and charging the cost to 232-555P.

3. Giveaways: If items are to be purchased by DOJ and given to event attendees provide a description of the item, the dollar value of the item, the anticipated total cost, and the name of the vendor from whom the items will be purchased.

APPROVALS:

Reneé Lushaj
Signature - Event Coordinator

9/2/15
Date

Stacy A. [Signature]
Signature - Supervisor

9/3/15
Date

* If more than 50% of attendees will be state employees and costs will be incurred, approval of the Administrator, Division of Management Services, must be given prior to the business event.

Signature - Administrator, DMS

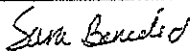
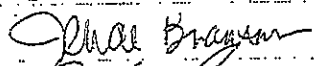
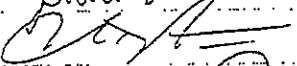
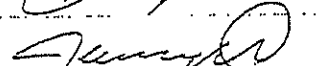

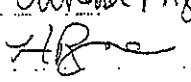
Date

Dunn County

1 of 12

Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 2 - Thursday, October 15, 2015

Dunn County

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
Sara Benedict		sbenedict@co.dunn.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Jenae Brantner		jbrantner@co.dunn.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chris Bub		bubc@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jeremy Davis		treatmentt@co.dunn.wi.us; jdavis@co.dunn.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sandy Frigo		Sandra.Frigo@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heather Pyka		hpyka@co.dunn.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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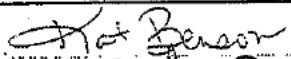

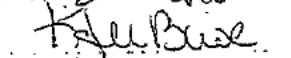


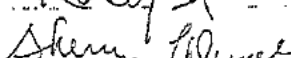


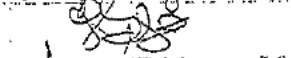
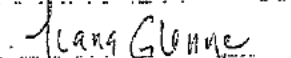
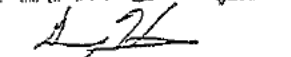
Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 3 - Friday, October 16, 2015

Dunn County

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
Sara Benedict	<i>Sara Benedict</i>	sbenedict@co.dunn.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Jenae Brantner	<i>Jenae Brantner</i>	jbrantner@co.dunn.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chris Bub	<i>Chris Bub</i>	bubc@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jeremy Davis	<i>Jeremy Davis</i>	treatmentite@co.dunn.wi.us; jdavis@co.dunn.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sandy Frigo	<i>Sandra Frigo</i>	Sandra.Frigo@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heather Pyka	<i>Heather Pyka</i>	hpyka@co.dunn.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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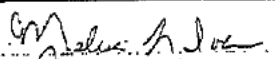

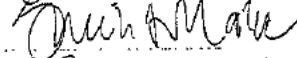
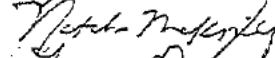
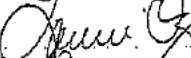
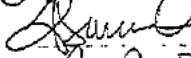

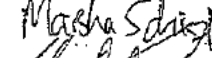
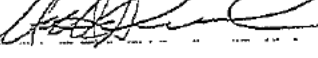
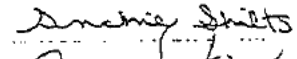
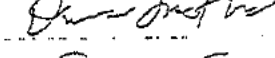
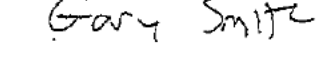
Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 1 - Wednesday, October 14, 2015

Eau Claire County

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
Kathy Benson-Storarr		[REDACTED]	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marjorie Blaschko		marjorie.blaschko@dwd.wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Kylee Bowe		brisheltercasemanager@yahoo.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sean Callister		Sean.Callister@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Elizabeth Colvin		elizabeth.colvin@lsswis.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kari Crawford		kari.crawford@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sherry Deyoe		sherry.deyoe@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Dawn Dutter		dawn.dutter@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Angela Engstrom		angela.engstrom@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lisa Geist		geist@vantagepointclinic.com	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Tiana Glenna		tiana.glenna@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gary Holden		holdeng@vantagepoint.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 1 - Wednesday, October 14, 2015

Eau Claire County continued

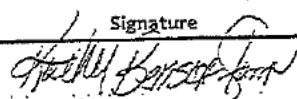
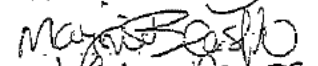

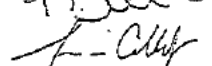
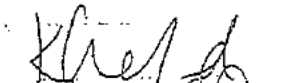
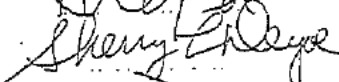



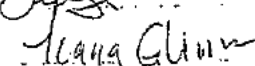
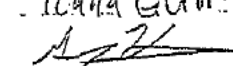
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Colleen Kastel		colleen.kastel@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Sheila Malec		sheila.malec@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Natalie McKinley		natalie.mckinley@va.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Laurie Osberg		osberg1@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tessa Sarauer		tessa.sarauer@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> NA
Brad Schalow			<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Marsha Schiszik		marsha.schiszik@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Michael Schumacher		michael.schumacher@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sunshine Shilts		sunshine.shilts@hshs.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Dana Smetana		DSmetana@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gary Smith		Smithg@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 1 - Wednesday, October 14, 2015
Eau Claire County continued

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Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 2 - Thursday, October 15, 2015

Eau Claire County

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Kathy Benson-Storarr		[REDACTED]	<input type="checkbox"/>	bensonk@vantagepointclinic.com	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Marjorie Blaschko		marjorie.blaschko@dwd.wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Kylee Bowe		brhsheltercasemanager@yahoo.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sean Callister		Sean.Callister@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Elizabeth Colvin		elizabeth.colvin@lsswis.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kari Crawford		kari.crawford@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sherry Deyoe		sherry.deyoe@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Dawn Dutter		dawn.dutter@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Angela Engstrom		angela.engstrom@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lisa Geist		geistl@vantagepointclinic.com	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tiana Glenna		tiana.glenna@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gary Holden		holdeng@vantagepoint.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 2 - Thursday, October 15, 2015

Eau Claire County continued

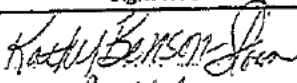


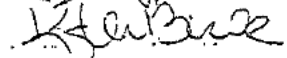
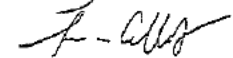
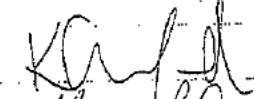
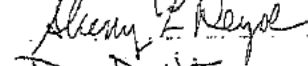
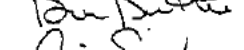
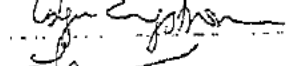
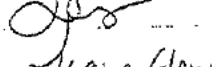
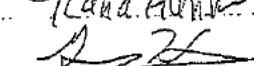

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
Melissa Ives	<i>Melissa Ives</i>	Melissa.Ives@co.eau-claire.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Colleen Kastel	<i>Colleen Kastel</i>	colleen.kastel@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Sheila Malec	<i>Sheila Malec</i>	sheila.malec@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Natalie McKinley	<i>Natalie McKinley</i>	natalie.mckinley@va.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Laurie Osberg	<i>Laurie Osberg</i>	osbergi@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tessa Sarauer	<i>Tessa Sarauer</i>	tessa.sarauer@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 1/15
Brad Schalow	<i>Brad Schalow</i>	[REDACTED]	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Marsha Schiszik	<i>Marsha Schiszik</i>	marsha.schiszik@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Michael Schumacher	<i>Michael Schumacher</i>	michael.schumacher@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sunshine Shilts	<i>Sunshine Shilts</i>	sunshine.shilts@hshs.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Dana Smetana	<i>Dana Smetana</i>	DSmetana@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gary Smith	<i>Gary Smith</i>	Smithg@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 2 - Thursday, October 15, 2015
Eau Claire County continued

[illegible]

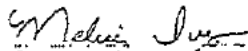
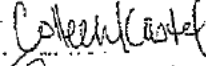
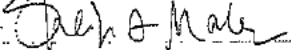
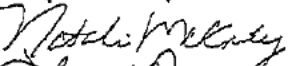
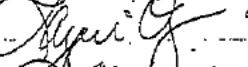


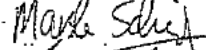

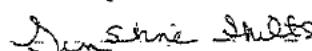
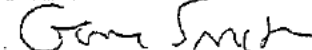
Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 3 - Friday, October 16, 2015

Eau Claire County

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
Kathy Benson-Storarr			<input type="checkbox"/>	benson.ke@vantagepointclinic.com	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Marjorie Blaschko		marjorie.blaschko@dwd.wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Kylee Bowe		brhsheltercasemanager@yahoo.com	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sean Callister		Sean.Callister@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Elizabeth Colvin		elizabeth.colvin@lsswis.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Karl Crawford		karl.crawford@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Sherry Deyoe		sherry.deyoe@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Dawn Dutter		dawn.dutter@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Angela Engstrom		angela.engstrom@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lisa Geist		geistl@vantagepointclinic.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Tiana Glenna		tiana.glenna@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gary Holden		holdeng@vantagepoint.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 3 - Friday, October 16, 2015

Eau Claire County continued

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
Melissa Ives		Melissa.Ives@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> NA
Colleen Kastel		colleen.kastel@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Sheila Malec		sheila.malec@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Natalie McKinley		natalie.mckinley@va.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Laurie Osberg		osberg1@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tessa Sarauer		tessa.sarauer@co.eau-claire.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brad Schalow			<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Marsha Schiszik		marsha.schiszik@co.eau-claire.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Michael Schumacher		michael.schumacher@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sunshine Shilts		sunshine.shilts@hshs.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Dana Smetana		DSmetana@opd.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gary Smith		Smithg@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 3 - Friday, October 16, 2015
Eau Claire County continued

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Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 1 - Wednesday, October 14, 2015
Lac du Flambeau/Vilas County

Continuing Education Credits

Name	Signature	Email	Correct?	Corrected Email	Judicial	Legal	Social Work	Law Enforcement
Robert Brandenburg			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Map Burns		burnsmr@opd.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shannon Cobe	Shannon M. Cobe	cobe@chiadmin.com	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Beth In Greven			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Courtney Jolin		jolinc@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nikki Main		nmain@pdcclinic.com	<input checked="" type="checkbox"/>	hmaine@ldftribe.com	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Al Moustakis		Al.Moustakis@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neal Nielsen		kimberly.McCallum@wicourts.gov	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ken Ninham		kninham@pdcclinic.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Frank Schuman		fschuman2@ldftribe.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Gary Smith			<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alice Soulier		aksoulier@ldftribe.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Gena McKenzie *Gena McKenzie* *GenaMcKenzie@yahoo.com*



Lac du Flambeau/Vilas County continued

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Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 2 - Thursday, October 15, 2015
Lac du Flambeau/Vilas County

Continuing Education Credits

Name	Signature	Email	Correct?	Corrected Email	Judicial	Legal	Social Work	Law Enforcement
Robert Brandenburg			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Matt Burns		burnsmr@opd.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shannon Cobe	Shannon M. Cobe	cobe@chiadmin.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Betty Jo Graves			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Courtney Jolin		jolin@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nikki Main		nmain@idfrb.com	<input type="checkbox"/>	nmain@idfrb.com	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Al Moustakis		Al.Moustakis@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neal Nielsen		kimberly.McCallum@wicourts.gov	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ken Ninham		kninham@pchlclinic.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Frank Schuman		fschuman2@idfrb.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gary Smith			<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alice Soulier		aksoulier@idfrb.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gena McKenzie		genamckenzie@yahoo.com					<input checked="" type="checkbox"/>	

Lac du Flambeau/Vilas County continued

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Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 3 - Friday, October 16, 2015
Lac du Flambeau/Vilas County

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
Robert Brandenburg			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mary Burns		burnsmr@opd.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shannon Cobe	Shannon M. Cobe	cobe@chiadmin.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Betty G. Gaudin			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Courtney Jolin		jolinc@opd.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nikki Main	Nikki Main	nmmain@ldftribe.com	<input type="checkbox"/>	nmmain@ldftribe.com	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Al Moustakis		Al.Moustakis@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neal Nielsen	Neal Nielsen	neal.nielsen@wicourts.gov	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ken Ninham	Ken Ninham	kninham@pohclinic.com	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Frank Schuman		fschuman2@ldftribe.com	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gary Smith	Gary Smith		<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alice Soulier	Alice K. Soulier	aksoulier@ldftribe.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gena McKenzie	Gena McKenzie	genamckenzie@yahoo.com					<input checked="" type="checkbox"/>	

Lac du Flambeau/Vilas County continued

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Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 1 - Wednesday, October 14, 2015

Marathon County

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
Lou Ann Bohn	<i>Lou Ann Bohn</i>	bohn1@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sidney Brubacher	<i>Sidney Brubacher</i>	Sidney.Brubacher@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brett Klug	<i>Brett Klug</i>	Brett.Klug@co.marathon.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Rachel Pagel		rpagel@acsclinicalservices.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Melanie Strand	<i>Melanie Strand</i>	melanie.strand@co.marathon.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Laura Yarie	<i>Laura Yarie</i>	laura.yarie@co.marathon.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Ronda Zastrow	<i>Ronda Zastrow</i>	ronda.zastrow@co.marathon.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Annette Zortman	<i>Annette Zortman</i>	annette.zortman@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dana Desmond	<i>Dana Desmond</i>	dana.desmond@wisconsin.gov			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lamar Jacobson	<i>Lamar Jacobson</i>	lamar.jacobson@wisconsin.gov			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Wisconsin Rapids Treatment Court Standards Training Sign-In

Day 2 - Thursday, October 15, 2015

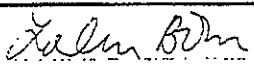
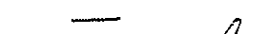
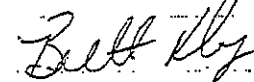

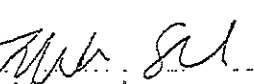
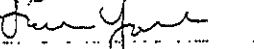


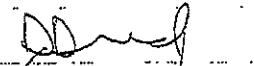

Marathon County

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
Lou Ann Bohn	<i>Lou Ann Bohn</i>	bohn1@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sidney Brubacher		Sidney.Brubacher@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brett Klug	<i>Brett Klug</i>	Brett.Klug@co.marathon.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Rachel Pangel		rpangel@acsdinicalserves.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Melanie Strand	<i>Melanie Strand</i>	melanie.strand@co.marathon.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Laura Yarie	<i>Laura Yarie</i>	laura.yarie@co.marathon.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Ronda Zastrow	<i>Ronda Zastrow</i>	ronda.zastrow@co.marathon.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Annette Zortman	<i>Annette Zortman</i>	annette.zortman@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dana Desmond	<i>Dana Desmond</i>	dana.desmond@wisconsin.gov			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LaMont Jacobson	<i>LaMont Jacobson</i>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Wisconsin Rapids Treatment Court Standards Training Sign-In

Day 3 - Friday, October 16, 2015

Marathon County

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
Lou Ann Bohn		bohn!@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sidney Brubacher		Sidney.Brubacher@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brett Klug		Brett.Klug@co.marathon.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Rachet Pagel		rpagel@acsclinicalservices.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Melanie Strand		melanie.strand@co.marathon.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Laura Yarie		laura.yarie@co.marathon.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Ronda Zastrow		ronda.zastrow@co.marathon.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Annette Zortman		annette.zortman@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dana Desmond					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LalMont Jacobson					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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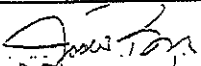

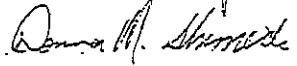
Oneida County

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Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 2 - Thursday, October 15, 2015

Oneida County

Continuing Education Credits

Name	Signature	Email	Correct?	Corrected Email	Judicial	Legal	Social		Law
							Work	Enforcement	
Jodi Baker		jb@thehumanservicecenter.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>
Chris Hartlep		ch@thehumanservicecenter.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>
Donna Shimeck		ds@thehumanservicecenter.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>
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					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

Columbia

Corey Endreas

Kelly Zuelke

Kelly.Zuelke@CO.Columbia.WI.US

Oneida County

8 of 12

Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 1 - Wednesday, October 14, 2015

Price County

Continuing Education Credits

Name	Signature	Email	Correct?	Corrected Email	Judicial	Legal	Social		Law	
							Work		Enforcement	
Kathleen Billek	<i>Kathleen Billek</i>	kathy.billek@co.price.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	
Tracie Burkart	<i>Tracie L. Burkart</i>	tracie.burkart@co.price.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	
Mary Jo Chizek	<i>Mary Jo Chizek</i>	Maryjo.chizek@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	
Douglas Fox	<i>Douglas Fox</i>	douglas.fox@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Mark Fuhr	<i>Mark Fuhr</i>	Mark.Fuhr@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Michael Hauschild	<i>Michael Hauschild</i>	police.chief@cityofphillips.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	
James Lex	<i>James Lex</i>	lexj@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Dottie Moffat	<i>Dottie Moffat</i>	Dottie.moffat@co.price.wi.us	<input checked="" type="checkbox"/>	see below too	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
Brian Schmidt	<i>Brian Schmidt</i>	sheriff@co.price.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input checked="" type="checkbox"/>	
Kelly Schultz	<i>Kelly Schultz</i>		<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	
Weigman Jack	<i>Jack Weigman</i>		<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	


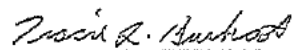
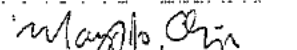
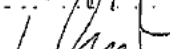

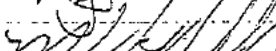
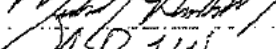
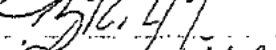

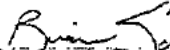



Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 2 - Thursday, October 15, 2015

Price County

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
Kathleen Billek	<i>Kathy Billek</i>	kathy.billek@co.price.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Tracie Burkart	<i>Tracie Burkart</i>	tracie.burkart@co.price.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mary Jo Chizek	<i>Mary Jo Chizek</i>	Maryjo.chizek@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Douglas Fox	<i>Douglas Fox</i>	douglas.fox@wicourts.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mark Fuhr	<i>Mark Fuhr</i>	Mark.Fuhr@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Michael Hauschild	<i>Michael Hauschild</i>	police.chief@cityofphillips.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
James Lex	<i>James Lex</i>	lexj@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dottie Moffat	<i>Dottie Moffat</i>	Dottie.moffat@co.price.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Brian Schmidt	<i>Brian Schmidt</i>	sheriff@co.price.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Kelly Schultz	<i>Kelly Schultz</i>		<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Weigman Jack	<i>Jack Weigman</i>		<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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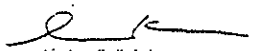


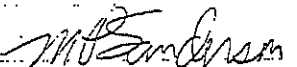
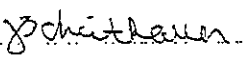
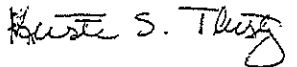
Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 3 - Friday, October 16, 2015

Price County

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
Kathleen Billek		kathy.billek@co.price.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Tracie Burkart		tracie.burkart@co.price.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mary Jo Chizek		Maryjo.chizek@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Douglas Fox		douglas.fox@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mark Fuhr		Mark.Fuhr@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Michael Hauschild		police.chief@cityofphillips.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
James Lex		lexj@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dottie Moffat		Dottie.moffat@co.price.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Brian Schmidt		sheriff@co.price.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kelly Schultz			<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Wagner, Jack			<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 1 - Wednesday, October 14, 2015

Taylor County

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
Patricia Bakke		patricia.bakke@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rania Brown		rania.brown@co.taylor.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Corey Dassow		corey.dassow@co.taylor.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ann Knox-Bauer		ann.knox-bauer@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shannon Kraucyk		shannon.kraucyk@wicourts.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jen Meyer		jen.meyer@co.taylor.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alec Nocco		noccoa@opd.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marie Peterson		marie.peterson@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Mike Sanderson		mike.sanderson@co.taylor.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Jill Scheithauer		jill.scheithauer@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wendy Schmidt		wendy.schmidt@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kristi Tlusty		Kristi.Tlusty@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 2 - Thursday, October 15, 2015

Taylor County

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
Patricia Bakke		patricia.bakke@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rania Brown	<i>Rania Brown</i>	rania.brown@co.taylor.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Corey Dassow		corey.dassow@co.taylor.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ann Knox-Bauer	<i>Ann Knox-Bauer</i>	ann.knox-bauer@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shannon Kraucyk	<i>Shannon Kraucyk</i>	shannon.kraucyk@wicourts.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jen Meyer	<i>Jen Meyer</i>	jen.meyer@co.taylor.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Alec Nocco	<i>Alec Nocco</i>	noccoa@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marie Peterson	<i>Marie Peterson</i>	marie.peterson@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Mike Sanderson	<i>Mike Sanderson</i>	mike.sanderson@co.taylor.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jill Scheithauer	<i>Jill Scheithauer</i>	jill.scheithauer@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wendy Schmidt		wendy.schmidt@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kristi Tlusty	<i>Kristi Tlusty</i>	Kristi.Tlusty@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 3 - Friday, October 16, 2015

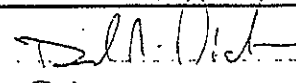

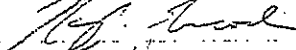


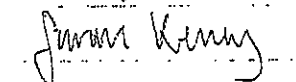
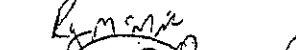


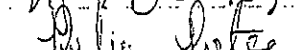
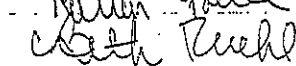
Taylor County

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
X Patricia Bakke		patricia.bakke@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rania Brown	<i>Rania Brown</i>	rania.brown@co.taylor.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
X Corey Dassow		corey.dassow@co.taylor.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ann Knox-Bauer	<i>Ann Knox-Bauer</i>	ann.knox-bauer@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shannon Kraucyk	<i>Shannon Kraucyk</i>	shannon.kraucyk@wicourts.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jen Meyer	<i>Jen Meyer</i>	jen.meyer@co.taylor.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
X Alec Nocco		noccoa@opd.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marie Peterson	<i>Marie Peterson</i>	marie.peterson@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mike Sanderson	<i>Mike Sanderson</i>	mike.sanderson@co.taylor.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jill Scheithauer	<i>Jill Scheithauer</i>	jill.scheithauer@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
X Wendy Schmidt		wendy.schmidt@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kristi Tlusty		Kristi.Tlusty@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 1 - Wednesday, October 14, 2015

Wood County


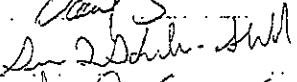


Continuing Education Credits

Name	Signature	Email	Correct?	Corrected Email	Judicial	Social		Law	
						Legal	Work	Enforcement	
David Dickmann		dickmannd@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Jackie Fischer		jacqueline.fischer@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Nicholas Grode		nicholas.grode@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Teri Heinzen		theinzen@co.wood.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Derek Iverson		derek.iverson@ci.marshfield.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Sarah Kenas		sarah.kenas@da.wi.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Craig Lambert		Craig.Lambert@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Ryan Mcmillen		rmcmillen@co.wood.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Melissa Niedfeldt		mniedfeldt@co.wood.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> treatment
Emily Nolan-Plutchak		emmoianplute@stcglobal.net nolan-plutchake@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rebecca Porter		rporter@co.wood.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Beth Ruehl		bruehl@co.wood.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Wisconsin Rapids Treatment Court Standards Training Sign-In

Day 1 - Wednesday, October 14, 2015

Wood County continued

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
Dan Schroeder		danielc.schroeder@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sue Schueler-Sheveland		ssheveland@co.wood.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Andrew Simon		asimon@co.wood.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Todd Wolf		todd.wolf@wicourts.gov	<input type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Michael Zell		michael.zell@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 2 - Thursday, October 15, 2015

Wood County

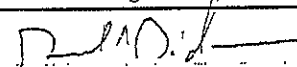
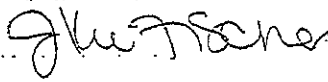



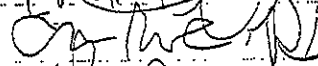
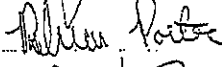
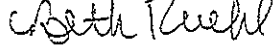
Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
David Dickmann	<i>David Dickmann</i>	dickmann@opd.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jackie Fischer	<i>Jackie Fischer</i>	jacqueline.fischer@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
○ Nicholas Grode	<i>Nicholas Grode</i>	nicholas.grode@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teri Heinzen	<i>Teri Heinzen</i>	theinzen@co.wood.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Derek Iverson	<i>Derek Iverson</i>	derek.iverson@ci.marshfield.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
○ Sarah Kenas		sarah.kenas@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Craig Lambert		Craig.Lambert@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
○ Ryan Mcmillen	<i>Ryan Mcmillen</i>	rmcmillen@co.wood.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Melissa Niedfeldt	<i>Melissa Niedfeldt</i>	mniedfeldt@co.wood.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Emily Nolan-Plutchak	<i>Emily Nolan-Plutchak</i>	emmilanplutee@bcglobal.net nolan-plutchake@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rebecca Porter	<i>Rebecca Porter</i>	rporter@co.wood.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Beth Ruehl	<i>Beth Ruehl</i>	bruehl@co.wood.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Wood County continued

Continuing Education Credits

Wisconsin Rapids Treatment Court Standards Training Sign-In
Day 3 - Friday, October 16, 2015

Wood County

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
David Dickmann		dickmannnd@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jackie Fischer		jacqueline.fischer@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
X Nicholas Grode		nicholas.grode@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teri Heinzen		theinzen@co.wood.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Derek Iverson		derek.iverson@ci.marshfield.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
X Sarah Kenas		sarah.kenas@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
X Craig Lambert		Craig.Lambert@da.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ryan Mcmillen		rmcmillen@co.wood.wi.us	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Melissa Niedfeldt		mniedfeldt@co.wood.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emily Nolan-Plutchak		emmilanplutt@sbegleba.net nolan-plutchake@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rebecca Porter		rporter@co.wood.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Beth Ruehl		bruehl@co.wood.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Treatment

Wood County continued

7

PURCHASING CARD LOG

Approved
6/7/15
AR

Cardholder (Employee) Name (as shown on payroll) Andrea E. Waters	For Statement Date: 10/23/15
Purchasing Card Number (last 4 digits only): [REDACTED]	

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased. For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory Number for items is \$5,000 or less
10/13/15	Walmart – Monona, WI	Treatment Court Standards Training – Participant Incentives (Candy)				\$83.46	
10/16/15	Radisson Harbourwalk Hotel – Racine, WI	Parking				\$6.00	✓
10/16/15	Radisson Harbourwalk Hotel – Racine, WI	Treatment Court Standards Training - Lodging for facilitators and staff		Various	\$80.00	\$1,840.00	✓
	Note to fiscal: former purchasing card number last 4 digits were 2538						

RECEIVED
DEC 17 2015
WI DEPARTMENT OF JUSTICE
BUREAU OF BUDGET & FINANCE

CARD TOTAL **\$1,929.46**

I wis JR - ja

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

Andrea Waters 11/9/15
Cardholder Date

Steve [Signature] 11/16/15
Supervisor Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

PO [Signature] 12/16/15
Div/Bureau P-Card Coordinator Date

Upon receipt of your US Bank statement, the purchasing card log must be completed for that statement period.
Cardholder is responsible to obtain a receipt for all purchases and credits.



U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

000001804 1 AV 0.391 106481244229637 P

ANDREA E WATERS
TAX [REDACTED]
DEPARTMENT OF JUSTICE-TS
17 W MAIN ST 8TH FLR
MADISON WI 53703-3960

Charge all
to 0

Appr: 24100
Dept: 4550404040
Project: 455ADLTDRGCRT14
Activity: DRUGCOURTPLNG

XXX

10-23-15

\$ 1,929.46

LY
NT

Cardholder

Signature _____ Date _____

Approver

Signature _____ Date _____

NEW ACCOUNT ACTIVITY					
POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
10-14	10-13	WM SUPERCENTER #3857 MONONA WI PUR ID: TAX: 0.00	24445005287400084221298	5411	83.46
10-19	10-16	RADISSON HOTEL RACINE HAR RACINE WI 11048231 ARRIVAL: 10-16-15	24342855291700029870307	7011	6.00
10-19	10-16	RADISSON HOTEL RACINE HAR RACINE WI 11048229 ARRIVAL: 10-16-15	24342855291700029870307	7011	1,840.00

Default Accounting Code: 455TS			TS026	
CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER [REDACTED]		ACCOUNT SUMMARY	
	STATEMENT DATE	DISPUTED AMOUNT	PREVIOUS BALANCE	\$.00
	10-23-15	\$.00	PURCHASES & OTHER CHARGES	\$1,929.46
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	AMOUNT DUE \$ 0.00 DO NOT REMIT		CASH ADVANCES	\$.00
			CASH ADVANCE FEE	\$.00
			CREDITS	\$.00
			TOTAL ACTIVITY	\$1,929.46



Ms. Andrea Waters
United States

Room No. : 229
Arrival : 10-13-15
Departure : 10-16-15
Page No. : 1 of 1
Folio No. : 122540
Conf. No. : 967766
Cashier No. : 10

INFORMATION INVOICE

Membership No. :
A/R Number :
Group Code : 1510XXXXXX
Company Name : Wisconsin Supreme Court

10-16-15 09:51:10 AM EST

Date	Text	Charges	Credits
10-13-15	Parking Pass	6.00	
	3 day parking pass		
10-16-15	VISA		6.00
	XXXXXXXXXXXX [REDACTED] XX/XX		
Total		6.00	6.00
Balance			0.00

Thank You For Staying With Us

I agree that my liability for this bill is not waived and agree to be held personally responsible in the event that the indicated person, company or association fails to pay for any portion or the full amount of these charges.

Guest Signature _____

Harbourwalk Hotel Racine
223 Gaslight Circle
Racine, WI 53403
Telephone: (262) 632-7777 Fax: (262) 632-7334
Email: front.desk@harbourwalkhotelryacine.com



State Court Office
United States

Room No. : 9000
Arrival : 10-13-15
Departure : 10-16-15
Page No. : 1 of 2
Folio No. : 122548
Conf. No. : 967764
Cashier No. : 1012

INFORMATION INVOICE

Membership No. :
A/R Number :
Group Code : 1510XXXXXX
Company Name : Wisconsin Supreme Court

10-16-15 11:32:48 AM EST

Date	Text	Charges	Credits
10-13-15	Room Routed From Gubbin Tommy Of Room #135	80.00	
10-13-15	Room Routed From Isenberger Pat Of Room #153	80.00	
10-13-15	Room Routed From Elliott Levine Of Room #155	80.00	
10-13-15	Room Routed From Waters Andrea Of Room #229	80.00	
10-13-15	Room Routed From Stark Lisa Of Room #353	80.00	
10-14-15	Room Routed From Gubbin Tommy Of Room #135	80.00	
10-14-15	Room Routed From Isenberger Pat Of Room #153	80.00	
10-14-15	Room Routed From Elliott Levine Of Room #155	80.00	
10-14-15	Room Routed From Waters Andrea Of Room #229	80.00	
10-14-15	Room Routed From Raymer Matthew Of Room #237	80.00	
10-14-15	Room Routed From Klekamp Jane Of Room #327	80.00	
10-14-15	Room Routed From Pohlman McQuillen Elizabeth Of	80.00	
10-14-15	Room Routed From Cobb Charlene Of Room #333	80.00	
10-14-15	Room Routed From Stark Lisa Of Room #353	80.00	
10-15-15	Room Routed From Gubbin Tommy Of Room #135	80.00	
10-15-15	Room Routed From Isenberger Pat Of Room #153	80.00	
10-15-15	Room Routed From Elliott Levine Of Room #155	80.00	
10-15-15	Room Routed From Waters Andrea Of Room #229	80.00	
10-15-15	Room Routed From Raymer Matthew Of Room #237	80.00	
10-15-15	Room Routed From Pohlman McQuillen Elizabeth Of	80.00	
10-15-15	Room Routed From Schoot Erika Of Room #330	80.00	
10-15-15	Room Routed From Cobb Charlene Of Room #333	80.00	
10-15-15	Room Routed From Stark Lisa Of Room #353	80.00	
10-16-15	VISA		1,840.00
	XXXXXXXXXX [REDACTED] XX/XX		
Total		1,840.00	1,840.00
Balance			0.00

Harbourwalk Hotel Racine
223 Gaslight Circle
Racine, WI 53403
Telephone: (262) 632-7777 Fax: (262) 632-7334
Email: front.desk@harbourwalkhotelracine.com

23 * 80 = 1840



State Court Office
United States

Room No. : 9000
Arrival : 10-13-15
Departure : 10-16-15
Page No. : 2 of 2
Folio No. : 122548
Conf. No. : 967764
Cashier No. : 1012

INFORMATION INVOICE

Membership No. :
A/R Number :
Group Code : 1510XXXXXX
Company Name : Wisconsin Supreme Court

10-16-15 11:32:48 AM EST

		Charges	Credits
Date	Text		

Thank You For Staying With Us

I agree that my liability for this bill is not waived and agree to be held personally responsible in the event that the indicated person, company or association fails to pay for any portion or the full amount of these charges.

Guest Signature _____

Harbourwalk Hotel Racine
223 Gaslight Circle
Racine, WI 53403
Telephone: (262) 632-7777 Fax: (262) 632-7334
Email: front.desk@harbourwalkhotelracine.com

BUSINESS EVENT AUTHORIZATION

(This form must be completed for every business event which will have costs paid by DOJ.)

Name and Purpose of Event: Wisconsin Treatment Court Standards TrainingDates/Times: 10/14/15 1:00am-5:00pm 10/15/15 8:00am-4:30pm 10/16/15 8:00am-4:30pmCity: Racine, WISponsoring Division/Bureau: Training and StandardsCoordinator: Reneé LushajEstimated # of Attendees: State Employees (* See below): 10Non-State Employees: 81Bureau Staff Attending: Matt Raymer, Reneé Lushaj, Andrea Waters

1. **Justification for site selection:** This must be provided if the location of the event will not a state government or university facility when more than 50% of attendees will be state employees.

2. **Justification for Food Costs:** Meals and break items, including service fees, must always be at state rates. Justification must be provided if these costs will exceed state maximums. Additionally, if more than 50% of attendees will be state employees headquartered in the business event city, justification must be provided for any food costs. We will be providing water and coffee to the attendees and charging the cost to 232-555P.

3. **Giveaways:** If items are to be purchased by DOJ and given to event attendees provide a description of the item, the dollar value of the item, the anticipated total cost, and the name of the vendor from whom the items will be purchased.

APPROVALS:

Reneé Lushaj
Signature – Event Coordinator

9/2/15
Date

Steph P.
Signature – Supervisor

9/3/15
Date

* If more than 50% of attendees will be state employees and costs will be incurred, approval of the Administrator, Division of Management Services, must be given prior to the business event.

Signature – Administrator, DMS

Date

WI Treatment Court Standards Training - 2015

.....

Day 1: Wednesday (1:00 – 5:00pm)

Binder sections 1-3

1:00 – 1:30p Welcome and Introductions (30 min)

Binder section 4

1:30 – 2:15p Standard 1: Commitment to Evidence-Based Practices (45 min)
2:15 – 2:35p Standard 2: Equal Treatment of People who have Experienced Discrimination or
Reduced Social Opportunities (20 min)
2:35 – 3:00p Standard 3: Planning Process (25 min)
3:00p Break
3:15 – 3:35p Breakout 1 for Standards 1, 2 & 3 (20 min)

Binder section 5

3:35 – 4:00p Standard 9: Confidentiality (25 min)
4:00 – 4:45p Standard 7: Recordkeeping (45 min)
4:45 – 5:00p Breakout 2 for Standards 9 & 7 (15 min)

Day 2: Thursday (8:00am – 4:30pm)

Binder section 6

8:00 – 8:30a Standard 12: Referral & Eligibility (30 min)
8:30 – 9:00a Standard 13: Screening & Assessment (30 min)
9:00 – 9:30a Breakout 3 for Standards 12 & 13 (30 min)
9:30a Break

Binder section 7

9:45 – 10:10a Standard 4: Teams (25 min)
10:10 – 10:40a Standard 5: Judicial Interaction/Role (30 min)
10:40 – 11:00a Breakout 4 for Standards 4 & 5 (20 min)

Binder section 8

11:00 – 11:15a Standard 8: Training (15 min)
11:15 – 11:45a Standard 6: Balancing the Non-Adversarial Approach with Due Process Concerns &
Community Safety (30 min)
11:45a – 12:00p Breakout 5 for Standards 6 & 8 (15 min)
12:00 – 1:00p Lunch

Counted 76 people
 (LP)

Racine Treatment Court Standards Training Sign-In
 Day 1 - Wednesday, October 14, 2015

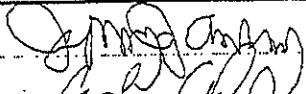

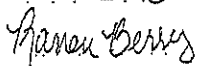
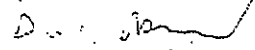

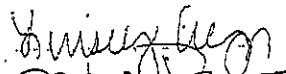


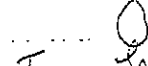
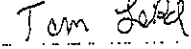
Kenosha County



Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
Jevon Claussen		jevon.claussen@kenoshacounty.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ruth Donalds		Ruth.Spielvogel-Donalds@wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jacqueline Gatlin		Jacqueline.Gatlin@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stephanie Karis		skarls@khs.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mark Kautzmann		mark.kautzmann@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tracy Kiesler		tracy@hoecouncil.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
John Langdon		john.langdon@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jennifer Madore		njm.jennifer@sbcglobal.net	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anthony Milisauskas		anthony.milisauskas@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jeannie Seefeldt		jseefeldt@oakwoodclinical.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Charles Sosinski		Charles.Sosinski@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Julia Stark		julia.stark@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Racine Treatment Court Standards Training Sign-In
Day 1 - Wednesday, October 14, 2015

Milwaukee County

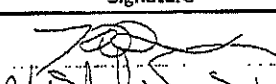
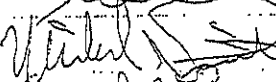
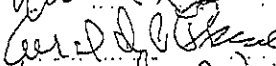

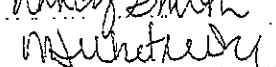
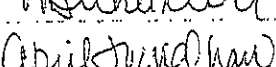
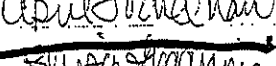
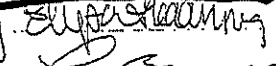
Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
Jeffrey Altenburg		Jeffrey.altenburg@da.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carl Ashley		carl.ashley@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Raven Berry		Raven.Berry@wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Darryl Bucholtz		darryl.bucholtz@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carol Carlson		ccarlson@justicepoint.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Zachary Conway		zachary.conway@milwaukeecountywi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Linsey Curzon		lcurzon@justicepoint.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Barbara Due		dueb@opd.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kelly Duggan		kelly.duggan@milwaukeecountywi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Caitlin Firer		firerc@opd.wi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tom Lebel		lebel@uwm.edu	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lisa Lollis		lisa.lollis@milwaukeecountywi.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Robin Dorman

dormanr@opd.wi.gov

Racine Treatment Court Standards Training Sign-In
Day 1 - Wednesday, October 14, 2015



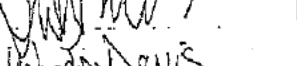
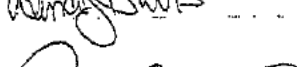
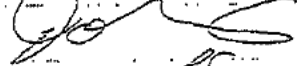
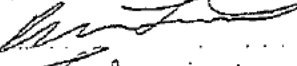
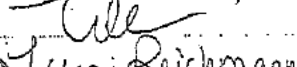

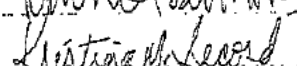
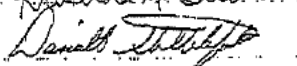


Racine County continued

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
James Pease		jimpease@rocketmail.com	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Michael Piontek		michael.piontek@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gerald Ptacek		gerald.ptacek@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nancy Smith		Nancy.Smith@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mary Jane Whitmore		maryjane.whitmore@goracine.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
April Windham		April.Windham@wicourts.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Elysia Skarney					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tom Banner					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Racine Treatment Court Standards Training Sign-In
Day 1 - Wednesday, October 14, 2015



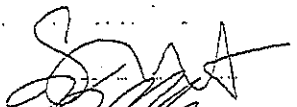

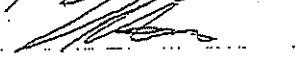
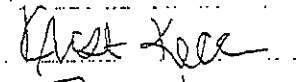


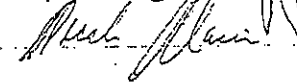
Walworth County

Continuing Education Credits

Name	Signature	Email	Correct?	Corrected Email	Judicial	Legal	Social Work	Law Enforcement
William Arreola		warreola@co.walworth.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Katie Behl		katie.behl@wicourts.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Julie Bonogofsky		[REDACTED]	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wendy Davis		wendy.f.davis@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Paul Gregory		gregoryp@uww.edu	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
John Kozlowicz		kozlowij@uww.edu	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chris Lindloff		christopher.lindloff@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Terra Parsons		terra.parsons@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teresa Reichmann		teresa.reichmann@wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kristi Reynolds		kreynolds@co.walworth.wi.us	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Kristy Secord		kristina.secord@wicourts.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Danielle Stubblefield		danielle.stubblefield@wisconsin.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Racine Treatment Court Standards Training Sign-In
Day 1 - Wednesday, October 14, 2015

Waukesha County

Name	Signature	Email	Correct?	Corrected Email	Continuing Education Credits			
					Judicial	Legal	Social Work	Law Enforcement
Susan Andrews		sandrews@waukeshacounty.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Michael Aprahamian		michael.aprahamian@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Marla Bell		marla.bell@wisconsin.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Samuel Benedict		benedicts@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Katie Bricco		briccok@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lloyd Carter		Lloyd.Carter@wicourts.gov	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jennifer Dorow		Jennifer.Dorow@wicourts.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kristy Gusse		kgusse@wiscs.org	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kristin Keck		kkeck@wiscs.org	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
John Kettler		jkettler@waukeshacounty.gov	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rebecca Luczaj		riuczaj@waukeshacounty.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nicole Masnica		masnica@opd.wi.gov	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

BUSINESS EVENT AUTHORIZATION

(This form must be completed for every business event which will have costs paid by DOJ.)

Name and Purpose of Event: Wisconsin Treatment Court Standards TrainingDates/Times: 10/14/15 1:00PM-5:00PM, 10/15/15 8:00AM-4:30PM, 10/16/15 8:00AM-4:30PM
City: Racine, WISponsoring Division/Bureau: Training & Standards Coordinator: Reneé LushajEstimated # of Attendees: State Employees (* See below): 10Non-State Employees: 81Bureau Staff Attending: Matt Raymer, Reneé Lushaj, Andrea Waters

1. Justification for site selection: This must be provided if the location of the event will not a state government or university facility when more than 50% of attendees will be state employees.

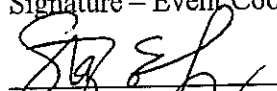
2. Justification for Food Costs: Meals and break items, including service fees, must always be at state rates. Justification must be provided if these costs will exceed state maximums. Additionally, if more than 50% of attendees will be state employees headquartered in the business event city, justification must be provided for any food costs.
We will be providing water and coffee to the attendees and charging the cost to 232-555P

3. Giveaways: If items are to be purchased by DOJ and given to event attendees provide a description of the item, the dollar value of the item, the anticipated total cost, and the name of the vendor from whom the items will be purchased.
Candy - \$80.00 - Walmart charging the cost to 232-555P

APPROVALS:



Signature - Event Coordinator6/3/16

Date

Signature - Supervisor6/3/16

Date

* If more than 50% of attendees will be state employees and costs will be incurred, approval of the Administrator, Division of Management Services, must be given prior to the business event.

Signature - Administrator, DMS_____
Date

Price, Lori A.

From: Price, Lori A.
Sent: Wednesday, May 04, 2016 3:56 PM
To: Waters, Andrea E.
Subject: 10-23-15 Pcard Log--BEA for Candy Purchase

Hi Andrea,

For your 10-23-15 p-card log that includes a \$83.46 candy purchase for the October Treatment Court Standards Training, do you have a Business Event Authorization for the candy? I see one for the water and coffee but not the candy. Please let me know.

Thanks.

Lori Price
Financial Specialist
Wisconsin Department of Justice
Phone (608) 266-1979
Fax (608) 266-1656
Pricela@doj.state.wi.us



Save money. Live better.

(608) 226 - 0913
MANAGER SARAH VOEBELI
2151 ROYAL AVE
HONOLUA HI 96713

ST# 03857	QPN 002844	TEN 23	TR# 09484
SHFLIP8PK	007164122480		7.94 0
SHFLIP8PK	007164122480		7.94 0
SHFLIP8PK	007164122480		7.94 0
ALL TIME BTS	003400098744	F	9.94 0
ALL TIME BTS	003400098744	F	9.94 0
FIXED	004000049642	F	9.94 0
FIXED	004000049642	F	9.94 0
KIT KAT ASST	003400007676	F	9.94 0
KIT KAT ASST	003400007676	F	9.94 0
SUBTOTAL			83.46
TOTAL			83.46
VISA TEND			83.46

ACCOUNT # *****
APPROVAL # 016817
RE # 1042000314
TRANS ID - 165286582430600
VALIDATION - LN2X
PAYMENT SERVICE - E
TERMINAL # 281034798

10/13/15 13:57:35

CHANGE DUE 0.00

ITEMS SOLD 9

TCH 7625 3227 5054 8687 9992



Low Prices You Can Trust. Every Day.
10/13/15 13:57:35

CUSTOMER COPY

Savings Catcher! Scan with Walmart app



PURCHASING CARD LOG

3
SCANNED

Cardholder (Employee) Name (as shown on payroll)
Stacy E. Lenz

For Statement Date: **12/4/15**

OK PM

Purchasing Card Number (last 4 digits only): XXXXXXXX

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased. For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory Number for items is \$5,000 or less
12/3/15	Amazon Marketplace	Fallen Officer in Memory bracelets				\$537.68	

CARD TOTAL **\$537.68**

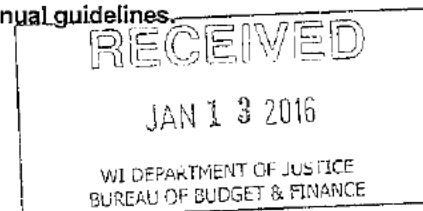
By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

Stacy E. Lenz
Cardholder
1/7/16
Date

[Signature]
Supervisor
1/7/16
Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

[Signature]
Div/Bureau P-Card Coordinator
1/12/16
Date



Upon receipt of your US Bank statement, the purchasing card log must be completed for that statement period. Cardholder is responsible to obtain a receipt for all purchases and credits.



ST OF WI - DOJ

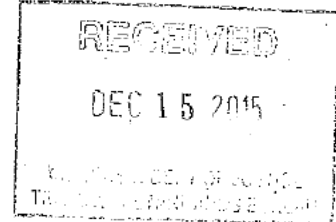


U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 12-04-15
TOTAL ACTIVITY \$ 537.68

000001074 1 AV 0.391 106481298397803 P
STACY E LENZ
TAX [REDACTED]
WI DEPT OF JUSTICE TS
17 W MAIN ST
MADISON WI 53703-3960

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT



Cardholder

Signature _____ Date _____

Approver

Signature _____ Date _____

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
12-04	12-03	AMAZON MKTPLCE PMTS AMZN.COM/BILL WA PUR ID: 115-6228474-62986 TAX: 0.00	24692165337000490489125	5942	537.68

Default Accounting Code: 455TS TS004

CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER [REDACTED]		ACCOUNT SUMMARY	
	STATEMENT DATE 12-04-15	DISPUTED AMOUNT \$.00	PREVIOUS BALANCE	\$.00
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6336 FARGO, ND 58125-6336	AMOUNT DUE \$ 0.00 DO NOT REMIT		PURCHASES & OTHER CHARGES	\$537.68
			CASH ADVANCES	\$.00
			CASH ADVANCE FEE	\$.00
			CREDITS	\$.00
			TOTAL ACTIVITY	\$537.68

Ship To:

Sara Phelan - Wisconsin Department of Justice
17 W MAIN ST
MADISON, WI 53703-3960

P large box

Order ID: 115-6228474-6298669

Thank you for buying from NewCharms on Amazon Marketplace.

Shipping Address:	Order Date:	Dec 2, 2015
Sara Phelan - Wisconsin Department of Justice	Shipping Service:	Standard
17 W MAIN ST	Buyer Name:	Sara Phelan
MADISON, WI 53703-3960	Seller Name:	NewCharms

Quantity	Product Details	Price	Total
10	100 Thin Blue Line Silicone Wristbands In Support Memory Police Officer SKU: 100ThinBlueLine ASIN: B007TTRU58 Listing ID: 0413MX3XDM3 Order Item ID: 02504113058458 Condition: New	\$48.88	Subtotal: \$488.80 <hr/> Total: \$488.80
1	100 Child Size Thin Blue Line Silicone Wristbands in Support Memory Police Officer SKU: 100ChildThinBlueLine ASIN: B00SG4ZORG Listing ID: 0119P3UBLLX Order Item ID: 38383354817762 Condition: New	\$48.88	Subtotal: \$48.88 <hr/> Total: \$48.88
ORDER TOTAL: \$537.68			

Returning your item:

Go to "Your Account" on Amazon.com, click "Your Orders" and then click the "seller profile" link for this order to get information about the return and refund policies that apply.

Visit <http://www.amazon.com/returns> to print a return shipping label. Please have your order ID ready.

Thanks for buying on Amazon Marketplace. To provide feedback for the seller please visit www.amazon.com/feedback. To contact the seller, go to Your Orders in Your Account. Click the seller's name under the appropriate product. Then, in the "Further Information" section, click "Contact the Seller."

PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll) Donna G Hahn	For Statement Date: 12-18-15
Purchasing Card Number (last 4 digits only): [REDACTED]	

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased. For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory Number for items is \$5,000 or less
12-07	Crime Scene/ AZ	Conference Give Aways	20100 4550403010 4270			\$448.50	
12-11	Lexington ME/ FL	Challenge Coins- Crime Lab	20100 4550403010 4270			\$2,450.00	
12-17	Michaels Stores/ Middleton WI	Plaques Retirement materials				\$21.96	

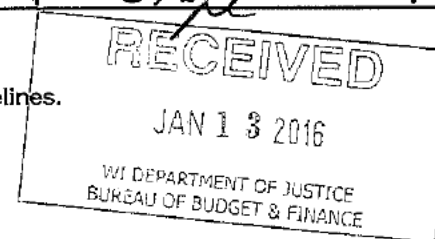
CARD TOTAL \$2920.46

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

Donna G Hahn 1-5-16 [Signature] 1-5-2016
Cardholder Date Supervisor Date

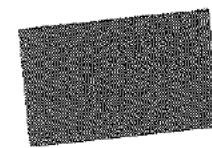
The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

[Signature] 1/12/16
Div/Bureau P-Card Coordinator Date



Upon receipt of your US Bank statement, the purchasing card log must be completed for that statement period.

Cardholder is responsible to obtain a receipt for all purchases and credits.





U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

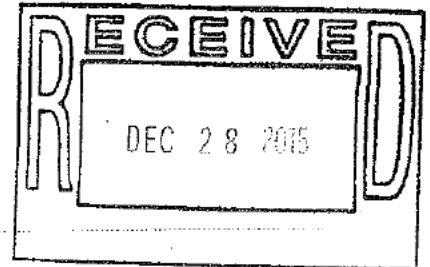
ST OF WI - DOJ

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 12-18-15
TOTAL ACTIVITY \$ 2,920.46

000000960 1 AV 0.391 106481317614127 P

DONNA G HAHN
TAX [REDACTED]
WI DEPT OF JUSTICE TS
17 W. MAIN ST.
MADISON WI 53703-3960

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT



Cardholder Signature _____ Date _____
Approver Signature _____ Date _____

NEW ACCOUNT ACTIVITY					
POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
12-08	12-07	CRIME SCENE 623-565-8573 AZ PUR ID: 59951911 TAX: 0.00	24492155341894599519114	5310	448.50
12-14	12-11	LEXINGTONME 800-282-8419 FL PUR ID: 4KVJ22X649CF4 TAX: 0.00	24492155346894736855830	5999	2,450.00
12-18	12-17	MICHAELS STORES 3745 MIDDLETON WI PUR ID: 3745000517941512171258 TAX: 0.00	24692165352000378059511	5970	21.96

Default Accounting Code: 455TS TS017			
CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER [REDACTED]		ACCOUNT SUMMARY
	STATEMENT DATE 12-18-15	DISPUTED AMOUNT \$.00	PREVIOUS BALANCE \$.00
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	AMOUNT DUE \$ 0.00 DO NOT REMIT		PURCHASES & OTHER CHARGES \$2,920.46
			CASH ADVANCES \$.00
			CASH ADVANCE FEE \$.00
			CREDITS \$.00
			TOTAL ACTIVITY \$2,920.46

[My Account \(https://www.crimescene.com/store/index.php?main_page=account\)](https://www.crimescene.com/store/index.php?main_page=account)\$ US Dollar (https://www.crimescene.com/store/index.php?main_page=account_history_info&order_id=82874¤cy=USD)**ORDER #82874****(<http://www.crimescene.com/store/>)**[Home \(https://www.crimescene.com/store/\)](https://www.crimescene.com/store/) > [My Account \(https://www.crimescene.com/store/index.php?main_page=account\)](https://www.crimescene.com/store/index.php?main_page=account) >
[History \(https://www.crimescene.com/store/index.php?main_page=account_history\)](https://www.crimescene.com/store/index.php?main_page=account_history)

Order Date: Monday 07 December, 2015

ORDER INFORMATION - ORDER #82874


Qty.	Products	Total
20 ea.	Bio-Hazard Candy	\$50.00
40 ea.	Candy Blood Clots	\$50.00
12 ea.	Crime Scene Bandages	\$66.00
30 ea.	Crime Scene Candy	\$112.50
20 ea.	Crime Scene Sandwich Bags	\$95.00
6 ea.	Murder Ink Sticky Notes	\$75.00

Sub-Total: \$448.50

Free Shipping (Delivery in 5-7 days. Varies based on destination.): \$0.00

Total: \$448.50

STATUS HISTORY & COMMENTS

Date	Order Status	Comments
12/07/2015	Processing	 (http://www.instantssl.com) Transaction ID: 5MX8321043155994W Payment Type: Credit Card (WPP) Timestamp: 2015-12-07T17:18:11Z Payment Status: Completed AVS Code: A CVV2 Code: M Amount: 448.50 USD
12/07/2015	Processing	

DELIVERY ADDRESS



* 1 - 0 0 0 0 *

Shipping Address:
Donna Hahn
17 W. Main Street, 8th Fl
Po Box 7857
Madison, WI 53707-7857

Order number: 82874 Hahn



Order Date: 12/7/2015
Shipping Method: Free Shipping (Delivery in 5-7 days. Varies based
Shipment Weight: 21

Thank you for your order. We hope you are happy with the products and we encourage you to tell us how we can improve. If you'd like to share your purchase experience you can post a product review by going to the product and clicking the button, "Product Reviews." Come back for a repeat purchase and take 10% off your order. To get this discount, enter the word return in the coupon area, on the payment page.



Supply Store

3440 N 16th St #4
Phoenix, Arizona 85016
<http://www.crimescene.com>

Order: 82874 Hahn

Placed: 12/7/2015

Ship To

Donna Hahn
Wisconsin Department Of Justice
17 W. Main Street, 8th Fl
Po Box 7857
Madison, Wisconsin 53707-7857

Bill To

Donna Hahn
Wisconsin Department Of Justice
17 W. Main Street, 8th Fl
Po Box 7857
Madison, Wisconsin 53707-7857

Item #	Name	QTY	Price	Total
11754	Crime Scene Bandages	12	5.50	66.00
SWEETCSI	Crime Scene Candy	30	3.75	112.50
MURDERPAD	Murder Ink Sticky Notes	6	12.50	75.00
SWEET-TT	Candy Blood Clots	40	1.25	50.00
CSI-12244	Crime Scene Sandwich Bags	20	4.75	95.00
SWEET-BIO	Bio-Hazard Candy	20	2.50	50.00

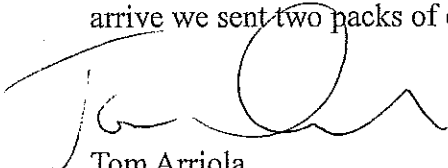
Sub Total: 448.50

Free Shipping (Delivery in 5-7 days. Varies based on destination.): 0.00

Order Total: 448.50

Shipment Weight: 21 lbs

We had to make a substitution for 2 of the bio-hazard candies. We expect more here soon and we will send them when they arrive. However since you may need the order before those two pesky candies arrive we sent two packs of crime scene blood in their place. I am sorry for the problems.



Tom Arriola

**LEXINGTON METAL PRODUCTS
CORPORATION**

PO Box 522
Lithia, FL 33547-0522
800-282-8419
e-mail: lexingtonmetal@tampabay.rr.com
web: www.militarybrasscoins.com

Invoice

Date	Invoice #
12/11/2015	02944



Bill To

Wisconsin Department of Justice
Attn: Donna Hahn
17 W. Main Street
PO Box 2718
Madison WI 53701-2718

Ship To

Wisconsin Department of Justice
17 W. Main Street
PO Box 2718
Madison WI 53701-2718

P.O. Number	Terms	Rep	Ship	Via	F.O.B.
Sara Phelan	Due on receipt	PJR	1/12/2016	US Mail	Lithia, FL

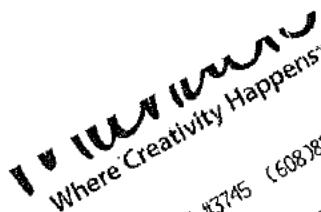
Quantity	Item Code	Description	Price Each	Amount
500	LMC-175	Custom 1.75 Inch Diameter Stamped Brass Coin "Wisconsin State Crime Laboratory Bureau" plated in gold with two sided color and one-sided sandblast texturing and 3D Wisconsin State Seal	4.75	2,375.00
1	Die Charge	Die Charge for Custom Coin (1/2 die charge for new coin front)	75.00	75.00
2	Free Shipping	Free Shipping and Insurance	0.00	0.00
		Out-of-state sale, exempt from sales tax	0.00%	0.00
<div style="display: flex; justify-content: space-around; align-items: flex-start;"> <div style="text-align: center;"> <p>Front</p>  <p>size:1.75"</p> </div> <div style="text-align: center;"> <p>Back</p>  </div> </div> <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <div> <p>■ raised shiny gold metal</p> <p>■ recessed shiny gold metal</p> <p>427 c</p> <p>300 c</p> <p>289 c</p> </div> <div> <p>■ raised shiny gold metal</p> <p>■ recessed shiny gold metal(sandblasted)</p> <p>3D</p> <p>289 c</p> </div> </div>				

Free shipping has been applied for pre-payment of this invoice. This saved you 36.00

Total

\$2,450.00

Put it on a coin!



Where Creativity Happens

MICHAELS STORE #3745 (608)824-8959
1700 DENNING WAY STE. 120
MIDDLETON, WI 53562

** Return Barcode **



8-9841-7965-6545-6900-5111-6116-1843-8305
1794 3745 005 12/17/16 12:58

1992 SALE

T-BLACK BOX SMALL 886946639852	1.99	1 @	1.99 N
(RETURN VALUE 1.39)			
T-BLACK BOX SMALL 886946639852	1.99	1 @	1.99 N
(RETURN VALUE 1.39)			
T-BLACK BOX SMALL 886946639852	1.99	1 @	1.99 N
(RETURN VALUE 1.39)			
T-BLACK BOX SMALL 886946639852	1.99	1 @	1.99 N
(RETURN VALUE 1.39)			
T-BLACK BOX SMALL 886946639852	1.99	1 @	1.99 N
(RETURN VALUE 1.39)			
T-BLACK BOX SMALL 886946639852	1.99	1 @	1.99 N
(RETURN VALUE 1.39)			
T-BLACK BOX SMALL 886946639852	1.99	1 @	1.99 N
(RETURN VALUE 1.39)			
T-BLACK BOX SMALL 886946639852	1.99	1 @	1.99 N
(RETURN VALUE 1.39)			
T-BLACK BOX SMALL 886946639852	1.99	1 @	1.99 N
(RETURN VALUE 1.39)			
T-BLACK BOX SMALL 886946639852	1.99	1 @	1.99 N
(RETURN VALUE 1.39)			
TISSUE UP CLASSIC 886946416538	7.49	1 @	7.49 N
(RETURN VALUE 5.28)			
30% OFF DISCOUNTABLE PURCH	9.41-		

99 NONTAXABLE TOTAL

AMOUNT QUALIFIED FOR DISCOUNT: \$ 31.37

Coupons Applied:
400100451588

30% ENTIRE TOTAL 21.96

ACCOUNT NUMBER
Visa

APPROVAL: 074832 SWIPED ONLINE

This receipt expires at 180 days on 06/19/16

8-9841-7965-6545-6900-5111-6116-1843-8305

YOU SAVED \$ 9.41



PURCHASING CARD LOG

OK

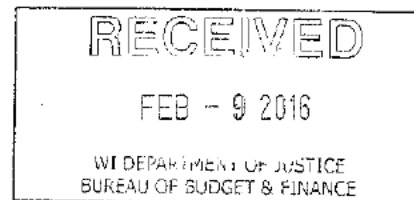
Cardholder (Employee) Name (as shown on payroll) Lewis, Eva M.	For Statement Date: 01-04-2016
Purchasing Card Number (last 4 digits only): XXXX XXXX XXXX [REDACTED]	

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory Number for Items \$5,000 or Less
12/28/2015	Crestline	promo mugs for the Bureau				1,163.46	

CARD TOTAL

\$1,163.46



By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

Eva Marie Lewis 01/11/2016
Cardholder Date

Keith Quinn 01/14/16
Supervisor Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

Keith Mahon 1-8-2016
Div/Bureau P-Card Coordinator Date

POH 2/8/16



ST OF WI - DOJ

U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343



ACCOUNT NUMBER [REDACTED]

STATEMENT DATE 01-04-16

TOTAL ACTIVITY \$ 1,163.46

2016 JAN -8 A 10:25



000001084 1 AT 0.416 106481340113847 P

EVA M LEWIS
TAX EX [REDACTED] DNA
STATE CRIME LAB
1578 S 11TH ST
MILWAUKEE WI 53204-2860

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT

Cardholder

Signature _____ Date _____

Approver

Signature _____ Date _____

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
12-29	12-28	CRESTLINE SPECIALTIES 800-285-0318 ME PUR ID: 1247186 TAX: 0.00	24493985363892011300768	5999	1,163.46

Default Accounting Code: 455MILLAB DNA004

CUSTOMER SERVICE CALL

800-344-5696

SEND BILLING INQUIRIES TO:

C/O U.S. BANCORP SERVICE CENTER, INC
U.S. BANK NATIONAL ASSOCIATION
P.O. BOX 6335
FARGO, ND 58125-6335

ACCOUNT NUMBER



STATEMENT DATE 01-04-16
DISPUTED AMOUNT \$.00

AMOUNT DUE

\$ 0.00

DO NOT REMIT

ACCOUNT SUMMARY

PREVIOUS BALANCE \$.00

PURCHASES &
OTHER CHARGES \$1,163.46

CASH ADVANCES \$.00

CASH ADVANCE FEE \$.00

CREDITS \$.00

TOTAL ACTIVITY \$1,163.46

INVOICE

Date: 12/28/15

Please Note Our New Remittance Address

2973970

Page 1 of 1

Account No.	876233	PO No.		Due Date	12/28/15
Order No.	1247186	Order Date	12/17/15	Shipped Via.	UPS - Ground COMMERCIAL

Bill To

STATE OF WISCONSIN
EVA LEWIS
1578 S 11TH ST
MILWAUKEE WI 53204

Ship To

STATE OF WISCONSIN
EVA LEWIS
1578 S 11TH ST
MILWAUKEE WI 53204

Item Number	Item Description	Ship Date	Qty	Unit Price	Amount
103190 01A	TORINO CAF MUG	12/23/15	378	2.410	910.98
C103190 1AR	1 COLOR IMPRINT	12/23/15	378		N/C
S103190 1RS	RE-ORDER SETUP CHARGE	12/23/15	1	10.000	10.00

Invoice #2973970

QUESTIONS? Call 1-800-221-7797

Please refer to your Account No. and our Invoice No. / Order No. in all communications regarding this invoice.

Subtotal	920.98
Sales Tax	0.00
Shipping and Handling	242.48
Total Invoice	1163.46
Payment	-1163.46
Balance Due	0.00

***NEW* Remit-To Address**

Please Remit Payment To:
Crestline Specialties, Inc.
PO Box 712144
Cincinnati, OH 45271-2144



Accounts past due 30 days and over are subject to a finance charge of 1 1/2% per month, which is an annual percentage rate of 18% to be applied to the unpaid balance.

PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll)
Donna G Hahn

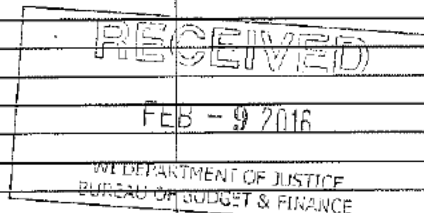
For Statement Date: 1-15-16

Purchasing Card Number (last 4 digits only): [REDACTED]

OK *DM*

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased. For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory Number for items is \$5,000 or less
01-04	Target/Sun Prairie, WI	Table Cloth for conference set up				\$16.99 ✓	
01-05	Fastenal Co/ WI	Hard hats—Drug Take Back				\$127.47 ✓	
01-06	4Imprint/ WI	Pens for Crime Lab hand outs—Conference	20100 455040 3010 4270			\$1,463.28 ✓	
01-09	Michaels Stores/ Middleton WI	Thank you cards, mourning bands, AG supplies				\$20.97 ✓	



CARD TOTAL \$1,628.71

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

Donna G Hahn
Cardholder

1/27/16
Date

[Signature]
Supervisor

1-28-2016
Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

[Signature]
Div/Bureau P-Card Coordinator

2/8/16
Date

Upon receipt of your US Bank statement, the purchasing card log must be completed for that statement period.

Cardholder is responsible to obtain a receipt for all purchases and credits.



U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

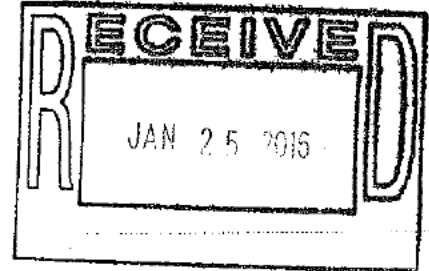
ST OF WI - DOJ

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 01-15-16
TOTAL ACTIVITY \$ 1,628.71

000001594 1 AV 0.391 106481354128932 P

DONNA G HAHN
TAX [REDACTED]
WI DEPT OF JUSTICE TS
17 W. MAIN ST.
MADISON WI 53703-3960

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT



Cardholder

Signature _____ Date _____

Approver

Signature _____ Date _____

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
01-05	01-04	TARGET 00024919 SUN PRAIRIE WI PUR ID: 0000000000000000 TAX: 0.00	24164076004091007975227	5411	16.99
01-06	01-05	FASTENAL COMPANY01 608-222-3278 WI PUR ID: W0018099 TAX: 0.00	24224436006104023300312	5251	127.47
01-07	01-06	4IMPRINT 877-4467746 WI PUR ID: cc TAX: 0.00	24906416006022048966494	5969	1,463.28
01-11	01-09	MICHAELS STORES 3745 MIDDLETON WI PUR ID: 3745000568581601091957 TAX: 0.00	24692166010000646833798	5970	20.97

Default Accounting Code: 455TS TS017

CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER <div></div>		ACCOUNT SUMMARY	
	STATEMENT DATE 01-15-16	DISPUTED AMOUNT \$.00	PREVIOUS BALANCE	\$.00
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	AMOUNT DUE \$ 0.00 DO NOT REMIT		PURCHASES & OTHER CHARGES	\$1,628.71
			CASH ADVANCES	\$.00
			CASH ADVANCE FEE	\$.00
			CREDITS	\$.00
			TOTAL ACTIVITY	\$1,628.71



SUN PRAIRIE - 608-834-5600
01/04/2016 08:22 AM EXPIRES 04/03/16



HOME
067032575 TABLECLOTH T \$16.99

SUBTOTAL \$16.99
TAX EXEMPT SALE \$0.00
TOTAL \$16.99

VISA CHARGE \$16.99
AID: A000000003101001
VISA CREDIT

REC#2-6004-2491-0079-7522-5 VCD#752-253-643

Information on recycling used
electronics in WI:
[http://dnr.wi.gov/topic/Ecycle/
wisconsin.html](http://dnr.wi.gov/topic/Ecycle/wisconsin.html) or call
888-936-7463



HUNDREDS OF INSTANT WIN PRIZES
EVERY MONTH!!
PLUS
A CHANCE TO WIN A \$1,500 TARGET GIFTCARD

www.informtarget.com
User ID: 7399 5750 9992
Password: 024 775

CUÉNTENOS EN ESPAÑOL

Survey Must Be Completed
within 72 Hours of Purchase
Must be 18 + to Enter
Target Team and Family Not Eligible
Complete Rules Available at Guest Services



Fastenal Company
P.O Box 1286
Winona, MN 55987-1286

Invoice

Date 1/5/16
Reference No. WIMAD347848
Page 1
DUE DATE: 02/04/2016

Cust. No. WIMAD0348
Cust. P.O. W0018093
Job No.

The store serving you is
2413 Advance Road

Madison, WI 53718
Phone #: (608)222-3278
Fax #: (608)222-0650

Contract No:

505ENT-M12-FACILITMRO-01
Ship To WISCONSIN DEPT OF ADMINISTRATION(DOA)
Donna Hahn
8th Floor, DLES/BBF
17 W MAIN ST
MADISON, WI 53703
1-608-2665710

Sold To
WISCONSIN DEPT OF ADMINISTRATION(DOA)
ADMINISTRATION DEPARTMENT OF
Division of Administrative Services
PO Box 7869
MADISON, WI 53707-7869
608-266-0742; 608-267-6928(Fax)

This Order and Document are subject to the "Terms of Purchase" posted on www.fastenal.com.

Line No.	Quantity Ordered	Quantity Shipped	Quantity Backorder	Description	Control No.	Part No.	Price / Each	Amount
1	1	1		0 A79R200000PEAKHrdHat	210095317	1024872	11.4225	11.42 G
2	1	1		0 V-GARD,BLUE,RATCHET	msaaaa	0201624	16.4550	16.46 G
3	6	6		0 815565 ProtectiveCap	msaaaa	1023607	16.5975	99.59 G

Received By

Comments
Contact: WISBUY_SQ

Tax Exemption
No Exemption

WI

Subtotal	127.47
Shipping & Handling	0.00
State Tax	0.00
County Tax	0.00
City Tax	0.00
TOTAL USD	127.47

If you re-package or re-sell this product, you are required to maintain integrity of Country of Origin to the consumer of this product.

Reasonable collection and attorneys fees will be assessed to all accounts placed for collection
No materials accepted for return without our permission.

X indicates part is a hazardous material

* indicates part was sold at a promotional or special discount price

This is your invoice.

All discrepancies must be reported within 10 days.

0

Thank You !

UPS CampusShip: View/Print Label

1. **Ensure there are no other shipping or tracking labels attached to your package.** Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
2. **Fold the printed label at the solid line below.** Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.
3. **GETTING YOUR SHIPMENT TO UPS**
Customers with a Daily Pickup
Your driver will pickup your shipment(s) as usual.

Customers without a Daily Pickup

Take your package to any location of The UPS Store®, UPS Access Point™ location, UPS Drop Box, UPS Customer Center, UPS Alliances (Office Depot® or Staples®) or Authorized Shipping Outlet near you. Items sent via UPS Return Services(SM) (including via Ground) are also accepted at Drop Boxes. To find the location nearest you, please visit the Resources area of CampusShip and select UPS Locations.

Schedule a same day or future day Pickup to have a UPS driver pickup all your CampusShip packages.

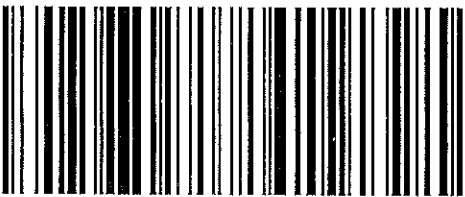
Hand the package to any UPS driver in your area.

UPS Access Point™
THE UPS STORE
6516 MONONA DR
MADISON, WI 53716

UPS Access Point™
THE UPS STORE
4230 EAST TOWNE BLVD
MADISON, WI 53704

UPS Access Point™
THE UPS STORE
1213 N SHERMAN
MADISON, WI 53704

FOLD HERE

FASTENAL WIMAD 6082223278 FASTENAL - WIMAD 2413 ADVANCE ROAD MADISON WI 53718	5 LBS	1 OF 1
SHIP TO: DONNA HAHN WISCONSIN DOA 8TH FLOOR, DLES/BBF 17 W. MAIN ST. MADISON WI 53703-3960		
	WI 537 1-41 	
UPS GROUND TRACKING #: 1Z 591 040 03 9218 5761		
		
BILLING: P/P		
 TM		
CS 18.0.22. WNTNVS0 69.0A 10/2015		

Summary - Requisition 69227912

General		Shipping Address	Payment Information	
Business Unit	Justice (45500)	ATTN: Donna Hahn DIVISION/BUREAU DLES/BBF ROOM/FLOOR 8th Floor 17 W MAIN ST Madison, WI 53703 United States	Cardholder	Donna G Hahn
Prepared by	Donna Hahn		Name	
Internal Attachments			Card Number	
Internal Note (Header)	no note		Card Security Code	
Note to all Suppliers	no note		Expiration Date	9/2016
WISBuy Order	W0018093			

Supplier / Line Item Details

Fastenal Company

Product Description		Catalog No	Size / Packaging	Unit Price	Quantity	Ext. Price
1	✓ Univ.HotPink 4Pt Nylon HDPE Ratchet Adj PEAK Hard Hat ⚡	1024872	EA	11.4225 USD	1 EA	11.42 USD
		Contract: 505ENT-M12-FACILTMRO-01				
Manufacturer Name	Honeywell Safety Products	Commodity Code	34556 Hats and Helmets, Safety (Incl. Fire Helmets)	Internal Note no note (Line)		
Manufacturer Part Number	A79R200000					
Supplier Part Auxiliary ID	A79R200000					
2	✓ 475359 Std 6.5-8" Blue Fas Trac V-Gard T-1 Slt HardCap ⚡	0201624	EA	16.455 USD	1 EA	16.46 USD
		Contract: 505ENT-M12-FACILTMRO-01				
Manufacturer Name	MSA (MINE SAFETY APPLIANCE)	Commodity Code	34556 Hats and Helmets, Safety (Incl. Fire Helmets)	Internal Note no note (Line)		
Manufacturer Part Number	475359					
Supplier Part Auxiliary ID	475359					
3	✓ 815565 Lime Green Slotted V-GARD Class E FAS-TRAC Cap ⚡	1023607	EA	16.5975 USD	6 EA	99.59 USD



101 Commerce St
PO Box 320
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746
Free Fax: 800-355-5043

Main Address	Invoice Address	Shipping Address
SARA PHELAN WISCONSIN DEPT OF JUSTICE 17 W MAIN ST MADISON, WI 53703-3960	Donna Hahn Wisconsin Dept of Justice 17 West Main Street Madison WI 53703 USA	Sara Phelan WI Department of Justice 17 West Main Street Madison, WI 53703 USA Tel: 608-266-7955

Order Number: 11493458	Questions Call: MiKall Dominski
Order Date: December 18, 2015	Phone: 877-446-7746 Ext. 8652
Account No.: 2509393	Fax: 800-355-5043
	Email: mdominski@4imprint.com

Item Party Pen		Colors (base,trim): Black, Silver			
Qty	Item #	Description	Unit \$	Price \$	Total \$
500	128633-OL	Party Pen	1.3300	665.00	665.00
1	Set-Up Charge	Screen Charge	45.0000	45.00	45.00
		Freight		21.64	21.64
					731.64

Artwork Instructions

Product Color (Base, Trim): Black,Silver
Imprint Location: Barrel
Imprint Colors: White

Item Party Pen		Colors (base,trim): Gunmetal, Silver			
Qty	Item #	Description	Unit \$	Price \$	Total \$
500	128633-OL	Party Pen	1.3300	665.00	665.00
1	Set-Up Charge	Screen Charge	45.0000	45.00	45.00
		Freight		21.64	21.64
					731.64

Artwork Instructions

Product Color (Base, Trim): Gunmetal,Silver
Imprint Location: Barrel
Imprint Colors: White

Grand Total 1,463.28



101 Commerce St
PO Box 320
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746
Free Fax: 800-355-5043

Order Number: 11493458
Order Date: December 18, 2015
Account No.: 2509393

Questions Call: MiKall Dominski
Phone: 877-446-7746 Ext. 8652
Fax: 800-355-5043
Email: mdominski@4imprint.com

**** Please re-check pricing and shipping methods ****

I understand and agree to the charges and shipping dates as listed:

Signed: _____ Date: _____

Thank You! We appreciate your business.
Any overruns you may have received are yours with our compliments.

- If paying by credit card, please contact your customer service representative with your credit card details.
- To insure proper credit to your account, please quote "11493458/2509393" on your check or remittance.
- If you are not satisfied with your order, please call 1-800-300-0764. All claims must be made within 5 days of receipt.
- Any questions regarding your invoice? Please call 1-800-982-8979. Our terms are Net 30.
- Please make checks payable to 4imprint

4imprint Federal ID [REDACTED] A Late Payment Charge based on maximum annual percentage allowed by your state law will be applied to this balance owed under this invoice when the invoice becomes past due. The purchaser agrees to pay all of the company's reasonable attorney's fees and any collection agency fees incurred in the collection of any amount owed hereunder and not paid when due. Purchaser agrees to pay any sales or use tax. No credit will be issued for returned merchandise without our consent. This invoice is a conditional acceptance by the seller of the buyer's offer to purchase seller's goods. It may contain terms which differ from or add to those contained in the buyer's purchase order, and to the extent that this is the case, the seller hereby expressly conditions its acceptance of the buyer's offer on the buyer's assent to the additional or different terms. The buyer's receipt and retention of the goods covered by this invoice constitutes acceptance of any such additional or different terms. The buyer and seller agree that any contract hereby entered into has been made and is to be construed according to our State Law.

Please visit our website - www.4imprint.com

Please Remit to:
4imprint, Inc.
25303 Network Place
Chicago, IL 60673-1253

Shipment Details

Shipment to	Qty	Item #	Estimated Ship Date	Carrier, service	Guaranteed Delivery Date	Freight
Address as above.	500	128633-OL	Dec 30 2015	UPS Ground (Parcel)	Jan 06 2016	21.64
	500	128633-OL	Dec 30 2015	UPS Ground (Parcel)	Jan 06 2016	21.64

Michael's

Where Creativity Happens™

MICHAELS STORE #3745 (608)824-8959

1700 DEMMING WAY STE. 120
MIDDLETON, WI 53562

*** Return Barcode ***

8-9841-3065-1015-2440-9111-6116-1843-7762



2393 SALE 6858 3745 005 1/09/16 19:57

HS MINC REACTIVE	718813699730	9.99	1 @	9.99 N
KNIT ELASTIC 1/4"	72879067415	1.99	1 @	1.99 N
KNIT ELASTIC 1/4"	72879067415	1.99	1 @	1.99 N
CARDS/ENV LRG WHT	400100671986	5.00	1 @	5.00 N
CARDS/ENV LRG WHT	400100671986	5.00	1 @	5.00 N
HS MINC REACTIVE	718813699730	9.99	1 @	9.99 N

(RETURN VALUE 5.99)

COUPON GET AN ITEM 40% OFF 4.00-

1 DISCOUNT 30.0 8.99-

99 NONTAXABLE TOTAL

Coupon(s) Applied:

400100901120 40% OFF ONE

TOTAL 20.97

ACCOUNT NUMBER

Visa

20.97

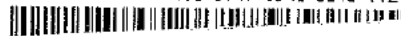
APPROVAL: 048463 SWIPED ONLINE

This receipt expires at 180 days on 07/12/16

8-9841-3065-1015-2440-9111-6116-1843-7762

YOU SAVED \$ 4.00

0004-9994-0964-4306-3141-0946-3846-772



SCANNED

PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll) Sara Phelan	For Statement Date: 1/15/16
Purchasing Card Number (last 4 digits only): [REDACTED]	

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory # for items is \$5,000 or less
1-5	Erins Irish Pub	New Chief's Conference Reception				1,018.04	
1-11	4imprint	T&S Vendor booth giveaways				970.98	

CARD TOTAL \$1,989.02

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

[Signature]
Cardholder

2/17/16
Date

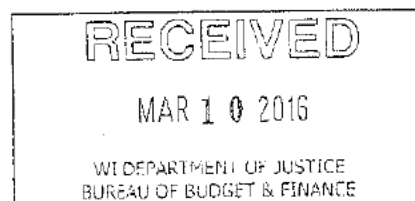
[Signature]
Supervisor

2/26/16
Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

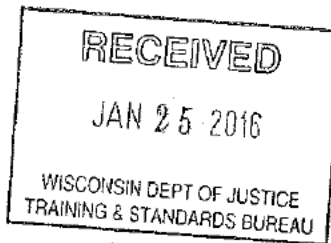
[Signature]
Div/Bureau P-Card Coordinator

3/9/16
Date





U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343



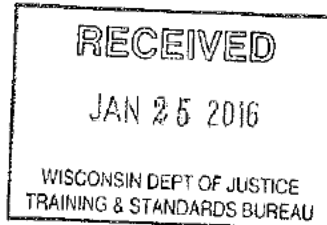
ST OF WI - DOJ

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 01-15-16
TOTAL ACTIVITY \$ 1,989.02

000001597 1 AV 0.391 106481354128935 P

SARA PHELAN
TAX [REDACTED]
DEPT OF JUSTICE CIB
17 W MAIN ST
MADISON WI 53703-3960

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT



Cardholder

Signature _____ Date _____

Approver

Signature _____ Date _____

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
01-06	01-05	ERINS SNUG IRISH PUB & RE MADISON WI	24013396005000485054789	5812	1,018.04
01-12	01-11	4IMPRINT 877-4467746 WI PUR ID: cc TAX: 0.00	24906416011022185029497	5969	970.98

Default Accounting Code: 455TS TS028

CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER [REDACTED]		ACCOUNT SUMMARY	
	STATEMENT DATE 01-15-16	DISPUTED AMOUNT \$.00	PREVIOUS BALANCE \$.00	
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	AMOUNT DUE \$ 0.00 DO NOT REMIT		PURCHASES & OTHER CHARGES \$1,989.02	
			CASH ADVANCES \$.00	
			CASH ADVANCE FEE \$.00	
			CREDITS \$.00	
			TOTAL ACTIVITY \$1,989.02	

de Macedo Amarante, Alvaro Roque

From: Phelan, Sara M.
Sent: Tuesday, July 05, 2016 9:09 AM
To: de Macedo Amarante, Alvaro Roque
Subject: RE: Pcard log-Sara Phelan-statement 1/15/16
Attachments: 2016 New Chiefs Agenda - Final.docx

Attached is the agenda for the New Chief's training

From: de Macedo Amarante, Alvaro Roque
Sent: Thursday, June 30, 2016 4:04 PM
To: Phelan, Sara M. <phelansm@doj.state.wi.us>
Subject: Pcard log-Sara Phelan-statement 1/15/16

Hello Sara

Can you please provide the agenda(s) for the "New Chief's Conference reception held in Erins Irish Pub on 01/06/2016?
The reason I am asking for the agenda is to establish if your spending falls within the uniform travel schedule amounts.
Thanks

Rocky de Macedo
Wisconsin Department of Justice
Division of Management and Services
Title: Purchasing Agent Objective/Purchasing Card administrator
Telephone: (608) 264-6216
Fax : (608) 266-1656

Agenda
2016 New Chiefs and Sheriffs Training Conference
January 4 - 8, 2016

Holiday Inn-American Center
5109 West Terrace Drive, Madison

Monday, January 4

- 9:00 am Registration**
- 9:30 am Welcome/Opening Remarks**
 Tony Barthuly, Director, Training and Standards Bureau
 Brian O'Keefe, Administrator, Division of Law Enforcement Services
 Barry Reynolds, Career Development Coordinator, Training and Standards
- 10:00 am Introductions**
- 10:45 am Leading Your Agency**
 Kevin Wilkinson, Chief, Neenah Police Department
- 12:00 pm Lunch**
- 12:45 pm Recruitment and Hiring**
 Brad Wentlandt, Chief, Greenfield Police Department
- 2:15 pm Break**
- 2:30 pm Open Records**
 Paul Ferguson, Assistant Attorney General
 Office of Open Government, Wisconsin Department of Justice
- 5:00-7:00 pm Networking Reception**

Tuesday, January 5

- 8:00 am Networking, Professional Associations, and Chief Mentoring**
 Robert Rosch, Chief, Hartland Police Department
 Sean Marschke, Chief, Sturtevant Police Department
- 9:00 am Property, Evidence and Asset Forfeiture – Legal Issues for the Chief Executive**
 Brad Wentlandt, Chief, Greenfield Police Department
- 10:15 am Break**
- 10:30 am Managing the Duties of Your Office**
 Todd Thomas, Chief, Appleton Police Department
- 12:00 pm Networking Lunch**
- 12:45 pm Officer Involved Shootings**
 Brian O'Keefe, Administrator, Division of Law Enforcement Services
- 2:00 pm Break**

2:15 pm **Values-Based Policing**
Mike Steffes, Chief, Rhinelander Police Department

3:15 pm **Break**

3:30 pm **Domestic Violence Issues for the Chief Executive**
Miriam Falk, Wisconsin Department of Justice

Friday, January 8

7:45 am **Pre-Graduation Breakfast with the Training and Standards Bureau**

Tony Barthuly, Director
Stacy Lenz, Deputy Director
Dana Vike, Program Supervisor, Certification/Curriculum
Shelly Sandry, Education Consultant, Jail and Secure Juvenile Detention
Stephanie Pederson, Education Consultant, Law Enforcement
Glenn Rehberg, Training Officer - Senior
Richard Williams, Officer Certification Specialist
Jannifer Ayers, Grant Specialist
Michael Akselrud, Training Officer – Senior
Thessa Phillips, Instructor Certification Specialist
Sara Phelan, Training Officer – Event Coordinator

9:00 am **Training and Standards Programs**
Stacy Lenz, Deputy Director
Barry Reynolds, Senior Training Officer

9:30 am **Chief Executive Panel Discussion – Challenges and Strategies**
Anna Ruzinski, Chief, Menomonee Falls Police Department
Michael Steffes, Chief, Rhinelander Police Department
Tim Strohmusch, Chief, Clear Lake Police Department
William Lamb, Chief, Fond du Lac Police Department
Kenneth Pileggi, Chief, Jefferson Police Department

11:30 am **Certificates of Award / Adjourn**
Attorney General Brad D. Schimel, State of Wisconsin

S SNUG IRISH PUB

2016 Time: 7:56:10 PM

Approved

Visa

Card: XXXXXXXXXX
 al: Swipe

Card No: 6808
 Cardholder: Ashley V
 Card: 571028

Card No: 804
 Server ID: 1
 Server: Main Dining Room
 Covers: 1

2
 PHELAN/SARA

1018.04

Approval: 083688

AGREE TO COMPLY WITH
 CARDHOLDER AGREEMENT

Customer Signature

ERIN'S SNUG IRISH PUB

Main Dining Room

JOIN US SUNDAYS
 FULL MENU BREAKFAST
 10:00 AM to 1:00 PM
 Ask about our Specials

Check No Tab Cov Server Time Date
 571028/2 804 1 6808 7:45:46 PM 1/4/2016

2	Platter Pot O Gold	160.00
2	Full Platter Potato Ski	220.00
2	Full Platter Chick Tend	240.00
2	Full Platter Club Wrap	220.00
1	Platter Veggie & Dip	45.00

Food Sub-Total 885.00

Beverage Sub-Total 0.00

Other Sub-Total 0.00

SUB TOTAL 1044.30
 Tip 159.30
 Discounts Sub-Total 0.00
 Sales Tax 57.44

TOTAL 1101.74

THANK YOU
 Ashley V

1101.74
 - 26.26
 57.44
 1018.04
 total is minus tax -57.44 and 26.26 left over from Chiefs sponsorship

BUSINESS EVENT AUTHORIZATION

(This form must be completed for every business event which will have costs paid by DOJ.)

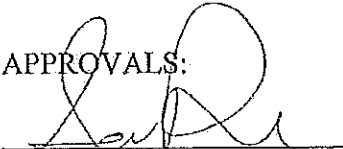
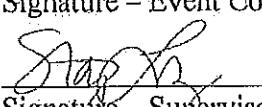
Name and Purpose of Event: New Chiefs TrainingDates/Times: Jan 4-8, 2016 City: MadisonSponsoring Division/Bureau: DLES/T&S Coordinator: Sara PhelanEstimated # of Attendees: State Employees (* See below): 3Non-State Employees: 50

1. Justification for site selection: This must be provided if the location of the event will not a state government or university facility when more than 50% of attendees will be state employees.
The simplified bid process was followed for this event

2. Justification for Food Costs: Meals and break items, including service fees, must always be at state rates. Justification must be provided if these costs will exceed state maximums. Additionally, if more than 50% of attendees will be state employees headquartered in the business event city, justification must be provided for any food costs.
State rate will be followed for all breaks and meals.

3. Giveaways: If items are to be purchased by DOJ and given to event attendees provide a description of the item, the dollar value of the item, the anticipated total cost, and the name of the vendor from whom the items will be purchased.

APPROVALS:


Signature - Event Coordinator12/21/15
Date
Signature - Supervisor12/21/15
Date

* If more than 50% of attendees will be state employees and costs will be incurred, approval of the Administrator, Division of Management Services, must be given prior to the business event.

Signature - Administrator, DMS_____
Date

Title	First Name	Last Name
Chief of Police	Thomas	Dietrich
Chief Ranger	Robert "Chris"	Madison
Chief of Police	James	Astle
Chief	Terry	Terpstra
Chief of Police	Jennifer	Iverson
Chief	David	Hooker
Chief	Lucas	Clements
Interim Chief	James	Gregoire
Chief	William	Pflum
Chief of Police	Brian	Uhl
Chief of Police	Scott	Marquardt
Chief	Nick	Reimer
Chief of Police	Tim	Gratz
Chief	Joshua	Jerry
Chief	Shane	Collins
Chief	Kevin	Schultz
Chief of Police	Aaron	McWilliams
Chief of Police	Adam	Grosz
Chief of Police	Kevin	Porter
Chief	Scott	Smith
Chief of Police	Phillip	Christenson
Chief	Philip	Welch
Chief	Jeremy	Likely
Chief of Police	Paul	Mascari
Chief of Police	Scot	Eisenhauer
Chief	Patrick	Jessup
Chief of Police	Thomas S	Huffine Jr
Chief of Police	Kristen	Devitt
Training Deputy	Donald	Cook
Interim Police Chief	Jason	Williams
Special Agent in Charge	Tyler	Quam
Police Chief	Andrew	Gavrilos
Chief of Police	Martin	Skibba
Chief of Police	James	Gorman

Additional attendees

10 T&S staff

4 presenters

5 local Chiefs

Total Attendees
= 53

**Order Confirmation 11494726**

Page 1

101 Commerce St
PO Box 320
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746
Free Fax: 800-355-5043

Main Address	Invoice Address	Shipping Address
SARA PHELAN WISCONSIN DEPT OF JUSTICE 17 W MAIN ST MADISON, WI 53703-3960	Sara Phelan Wisconsin Dept of Justice 17 W MAIN ST MADISON WI 53703-3960 USA	Sara Phelan Wisconsin Dept of Justice 17 W Main Street Madison, WI 53703 USA Tel: 608-266-7955

Order Number: 11494726	Questions Call: Eric Hansen
Order Date: December 21, 2015	Phone: 877-446-7746 Ext. 8454
Account No.: 2509393	Fax: 866-230-6332
	Email: ehansen@4imprint.com

Item		Sauron Tumbler with Straw - 22 oz.	Colors	(Tumbler,Straw) : See Below		
Qty	Item #	Description	Unit \$	Price \$	Total \$	
300	117214	Sauron Tumbler with Straw - 22 oz.	2.9600	888.00	888.00	
		75 - Clear, Clear	0.0000	0.00	0.00	
		75 - Translucent Lime Green, Translucent Lime Green	0.0000	0.00	0.00	
		75 - Translucent Pink, Translucent Pink	0.0000	0.00	0.00	
		75 - Translucent Royal Blue, Translucent Royal Blue	0.0000	0.00	0.00	
1	Coupon	Coupon Code	-93.8000	-93.80	-93.80	
1	Set-Up Charge	Set-Up Charge	50.0000	50.00	50.00	
		Freight		126.78	126.78	

Artwork InstructionsProduct Color (Base, Trim): See Below, See Below
Imprint Location: Front
Imprint Colors: See Instructions
Special Instructions: white imprint on blue
black imprint on the rest**Grand Total** 970.98**Thank you for your order!**

If you need to make a change - Please call your account representative. Their name and phone number are shown above.

Shipment Details

Shipment to	Qty	Item #	Estimated Ship Date	Carrier, service	Guaranteed Delivery Date	Freight
Address as above.	300	117214	Jan 08 2016	UPS Ground (Parcel)	Jan 13 2016	126.78

PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll) Sara Phelan	For Statement Date: 1/29/16
Purchasing Card Number (last 4 digits only): [REDACTED]	

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory # for items is \$5,000 or less
1-14	Southwest airlines	Flight Police Week				197.96	
1-22	5.11 tactical	AG Summit giveaway				4900.00	

CARD TOTAL \$5,097.96

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

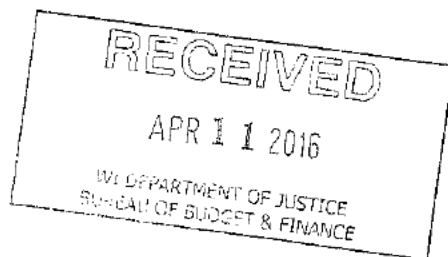
Sara Phelan 3/31/16
Cardholder Date

Steph Edy 4/4/16
Supervisor Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

PO [Signature] 4/8/16
Div/Bureau P-Card Coordinator Date

I will
JR
- ja





U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

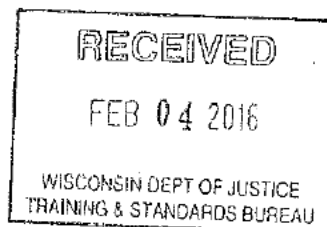
ST OF WI - DOJ

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 01-29-16
TOTAL ACTIVITY \$ 5,097.96

000000967 1 AV 0.391 106481372983219 P

SARA PHELAN
TAX [REDACTED]
DEPT OF JUSTICE CIB
17 W MAIN ST
MADISON WI 53703-3960

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT



Cardholder Signature _____ Date _____
Approver Signature _____ Date _____

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
01-18	01-14	SOUTHWES 5262173836006 800-435-9792 TX PHELAN/SARA DEPARTURE: 05-11-16	24692166015000438330362	3066	197.96
01-25	01-22	MKE WN N DCA WN N MKE 5.11 TACTICAL.COM 866-451-1726 CA PUR ID: 27501777MIQWF8X86 TAX: 0.00	24431056022083275017771	5691	4,900.00

Default Accounting Code: 455TS TS028

CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER [REDACTED]		ACCOUNT SUMMARY	
	STATEMENT DATE	DISPUTED AMOUNT		
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	01-29-16	\$.00	PREVIOUS BALANCE	\$.00
			PURCHASES & OTHER CHARGES	\$5,097.96
			CASH ADVANCES	\$.00
			CASH ADVANCE FEE	\$.00
			CREDITS	\$.00
		AMOUNT DUE \$ 0.00 DO NOT REMIT	TOTAL ACTIVITY	\$5,097.96

TRAINING AND/OR TRAVEL REQUEST

This form is not required UNLESS you are attending training, a conference, or if you are traveling out of state.

EMPLOYEE INFORMATION

Originator of Request (may be different than attendee/traveler) Sara Phelan		Request Date 1/13/2016
Headquarters City Madison	Business Phone Number 608-264-6364	Division/Office DLES/T&S

EVENT INFORMATION

Event Type: TRAVEL OUT OF STATE		
Title of Training, Conference, or Meeting National Police Week 2016	Sponsoring Organization Click here to enter text.	
Location (City & State) Washington DC	Departure Date 5/11/2016	Return Date 5/17/2016
Reason for Attending (please describe content or subject matter of event and how your attendance would benefit the DOJ) National Police Week is a collaborative effort of many organizations dedicated to honoring America's law enforcement community. The principal organizers of National Police Week include: National Law Enforcement Officers Memorial Fund, Fraternal Order of Police/Fraternal Order of Police Auxiliary, and Concerns of Police Survivors. Established by a joint resolution of Congress in 1962, National Police Week pays special recognition to those law enforcement officers who have lost their lives in the line of duty for the safety and protection of others. I will be there representing the Wisconsin Department of Justice as Wisconsin will be adding 2 officers this year to the wall; Trooper Trevor Casper and Officer Ryan Copeland.		Attachments(s) No If yes, forward brochure and/or agenda with request

ATTENDEE INFORMATION – PLEASE COPY THIS SECTION AND FILL OUT FOR EACH INDIVIDUAL ATTENDEE/TRAVELER

TO ADD MORE THAN ONE ATTENDEE/TRAVELER, SELECT INFORMATION BETWEEN THE TWO ARROWS (→) AND CLICK COPY ON THE HOME TAB OF YOUR RIBBON. CLICK BELOW THIS SECTION (OUTSIDE OF THE TABLE) AND CLICK PASTE ON THE HOME TAB OF YOUR RIBBON. REPEAT THIS FOR EACH ADDITIONAL ATTENDEE/TRAVEL.

→ **Attendee/Traveler Name** (please list each attendee/traveler information separately)

Sara Phelan

Total Cost estimates – Include ALL costs including costs paid by DOJ, individual, or third party.

Type of cost	Estimated Amount (Do not use a range)	P-card (Type "yes" if using a P-card for this expense)	Third Party Reimbursement ⁺	
			Name of third party funding this expense. Only if cost is not being paid by DOJ or attendee/traveler	Indicate if the 3rd party is prepaying for the expense or if the DOJ is being reimbursed
Registration Fees	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Airfare	\$250	yes	Click here to enter text.	Click here to enter text.

⁺ Employees may not receive payment directly from a third party. Payment must be made to Wisconsin Department of Justice. Allowable expenses will be paid to the employee by WI-DOJ and will be limited to maximum amounts in the UTSA guidelines. Each division is responsible for collection of third party reimbursements.

TRAINING AND/OR TRAVEL REQUEST

Auto (see rental car note below)	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Lodging (see lodging question below if cost exceeds the allowance for the destination city. Allowances can be found here.)	\$1750	yes	Click here to enter text.	Click here to enter text.
Meals	\$300	No	Click here to enter text.	Click here to enter text.
Other (please specify) Transportation to/from airport	\$100	Yes	Click here to enter text.	Click here to enter text.
Total	\$2400			
Please explain why a rental car is the most cost efficient mode of transportation.		Click here to enter text.		
If cost of lodging exceeds the allowance for the city please provide an explanation for why this lodging option was used. Allowances can be found here.		Event is at the hotel	No other rooms available	Other:
		Click here to enter text.	Click here to enter text.	Click here to enter text.
Comments	Click here to enter text. ←			

FUNDING SOURCE					
Fund	Appr	Dept	Program	Project (if applicable)	Activity (if applicable)
100	23200	4550404000	5550	Click here to enter text.	Click here to enter text.

APPROVALS		
Required for all types of requests	Tony Barthuly	1/13/2016
	Immediate Supervisor	Date
Required for all types of requests except free training	Brian R. O'Keefe	1/13/2016
	Division Administrator or Designee	Date
Required for all Out-of-State Travel	Karen Van Schoonhoven	1/13/2016
	Budget Director	Date

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Phelan, Sara M.

From: Southwest Airlines [SouthwestAirlines@luv.southwest.com]
Sent: Thursday, January 14, 2016 10:30 AM
To: Phelan, Sara M.
Subject: Flight reservation (R4BD52) | 11MAY16 | MKE-DCA | Phelan/Sara

Thanks for choosing Southwest® for your trip.

 [Log in](#) | [View my itinerary](#)

Southwest

[Check In
Online](#)

[Check Flight
Status](#)

[Change
Flight](#)

[Special
Offers](#)

[Hotel
Offers](#)

[Car
Offers](#)

Ready for takeoff!



Thanks for choosing Southwest® for your trip. You'll find everything you need to know about your reservation below. Happy travels!

Upcoming Trip: Police Week 2016



[Air Itinerary](#)

AIR Confirmation: R4BD52

Confirmation Date: 01/14/2016

Passenger(s)	Rapid Rewards #	Ticket #	Expiration	Est. Points Earned
PHELAN/SARA	[REDACTED]	5262173836006	Jan 13, 2017	948

Rapid Rewards points earned are only estimates. Visit your (MySouthwest, Southwest.com or Rapid Rewards) account for the most accurate totals - including A-List & A-List Preferred bonus points.

Date	Flight	Departure/Arrival
Wed May 11	2387	Depart MILWAUKEE, WI (MKE) on Southwest Airlines at 12:45 PM Arrive in WASHINGTON (REAGAN NATIONAL), DC (DCA) at 3:35 PM Travel Time 1 hrs 50 mins Wanna Get Away

Date	Flight	Departure/Arrival
Tue May 17	3874	Depart WASHINGTON (REAGAN NATIONAL), DC (DCA) on Southwest Airlines at 2:00 PM Arrive in MILWAUKEE, WI (MKE) at 3:05 PM Travel Time 2 hrs 5 mins Wanna Get Away



Check in for your flight(s): 24 hours before your trip on [Southwest.com](#) or your mobile device to secure your boarding position. You'll be assigned a boarding position based on your check-in time. The earlier you check in within 24 hours of your flight, the earlier you get to board.



Save up to 35%
plus earn up to 2,400
Rapid Rewards® points.

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\$12.50
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- ✓ Free cancellation

[Book a hotel >](#)

 **Bags fly free®:** First and second checked bags. Weight and size limits apply. One small bag and one personal item are permitted as carryon items, free of charge.

 **30 minutes before departure:** We encourage you to arrive in the gate area no later than 30 minutes prior to your flight's scheduled departure as we may begin boarding as early as 30 minutes before your flight.

 **10 minutes before departure:** You must obtain your boarding pass(es) and be in the gate area for boarding at least 10 minutes prior to your flight's scheduled departure time. If not, Southwest may cancel your reserved space and you will not be eligible for denied boarding compensation.

 **If you do not plan to travel on your flight:** In accordance with Southwest's No Show Policy, you must notify Southwest at least 10 minutes prior to your flight's scheduled departure if you do not plan to travel on the flight. If not, Southwest will cancel your reservation and all funds will be forfeited.

Air Cost: 197.96

Fare Rule(s): 5262173836006: NONREF/NONTRANSFERABLE/STANDBY REQ UPGRADE TO Y.

Valid only on Southwest Airlines. All travel involving funds from this Confirmation Number must be completed by the expiration date. Unused travel funds may only be applied toward the purchase of future travel for the individual named on the ticket. Any changes to this itinerary may result in a fare increase. Failure to cancel reservations for a Wanna Get Away fare segment at least 10 minutes prior to travel will result in the forfeiture of all remaining unused funds.

MKE WN WAS78.96NDNUNNR WN MKE78.96NDNUNNR 157.92 END
ZPMKEDCA XFMKE4.5DCA4.5 AY11.20\$MKE5.60 DCA5.60



Add a rental car

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- ✓ Guaranteed low rates
- ✓ Free cancellation

Book a car >

**Travel more
for less.**

Exclusive deals for your
favorite destinations.

Sign up and save >

Southwest®

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- ✓ Unlimited reward seats
- ✓ No blackout dates
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WiFi & entertainment ➤

Cost and Payment Summary

✕ AIR - R4BD52

Base Fare	\$ 157.92
Excise Taxes	\$ 11.84
Segment Fee	\$ 8.00
Passenger Facility Charge	\$ 9.00
September 11th Security Fee	\$ 11.20
Total Air Cost	\$ 197.96

Payment Information

Payment Type: Visa 
Date: Jan 14, 2016
Payment Amount: \$197.96

BUSINESS EVENT AUTHORIZATION

(This form must be completed for every business event which will have costs paid by DOJ.)

Name and Purpose of Event: 2016 Attorney General's Summit on Public SafetyDates/Times: 03/14 - 3/16, 8am to 12 noon City: Wisconsin DellsSponsoring Division/Bureau: DLES/T&S Coordinator: Sara PhelanEstimated # of Attendees: State Employees (* See below): 50Non-State Employees: 200

1. Justification for site selection: This must be provided if the location of the event will not a state government or university facility when more than 50% of attendees will be state employees.
Need location with lodging on-site. Simplified bid process used to find most economical option.

2. Justification for Food Costs: Meals and break items, including service fees, must always be at state rates. Justification must be provided if these costs will exceed state maximums. Additionally, if more than 50% of attendees will be state employees headquartered in the business event city, justification must be provided for any food costs.
This is the Attorney General's premier event. A quality meal is needed for the formal luncheon.

3. Giveaways: If items are to be purchased by DOJ and given to event attendees provide a description of the item, the dollar value of the item, the anticipated total cost, and the name of the vendor from whom the items will be purchased.
Back pack \$14.00 per item including logo - total cost \$4,900, 5.11 Tactical is the vendor.

APPROVALS:


 Signature - Event Coordinator

3-1-16
 Date


 Signature - Supervisor

3/3/16
 Date

* If more than 50% of attendees will be state employees and costs will be incurred, approval of the Administrator, Division of Management Services, must be given prior to the business event.

 Signature - Administrator, DMS

 Date



www.511tactical.com

Please Remit Payments To:
5.11 Inc.
62789 Collection Center Drive
Chicago, IL 60693-0627

Wire Payments may be sent to:
Bank of America
100 West 33rd Street
New York, NY 10001
Account Name: 5.11, Inc.
Account # [REDACTED]
Routing/Transit (ABA) # [REDACTED]

INVOICE

INQUIRES TO:
PHONE USA 209-527-4511
COMPANY 11 DIVISION 11
PAGE 1

SOLD TO

■ ASSOCIATION PACKAGE ACCT
730 11 73060 1005
MARKETING PACKAGES

MODESTO CA 95356

SHIP TO

■ WI DEPT OF JUSTICE
ATTN: SARA PHELAN
17 W MAIN STREET

MADISON WI 53703

ORDER #	PURCHASE ORDER #	SHIPPING METHOD	TERMS	NET DISCOUNT	CUST #	STORE #	SHIP VIA	ORDER CONTROL #	INVOICE DATE	INVOICE #	
010516	WI DOJ		CREDIT CARD ON	40.0%	77001	1	UPS PRE PAID 2 5CRTN(S)	2608701	1/20/16	3072289	
			SALES REP ASSOCIATIONS						CUSTOMER SERV. REP CUSTOMER DIRECT/H		SEASON P10 START DATE 1/05/16 CANCEL DATE 2/04/16 SEE BELOW
LINE	STYLE	DESCRIPTION	COLOR	DESCRIPTION	QTY	SC	SIZE	QTY	PRICE	AMOUNT	
100	Must Ship 2/16/16										
	SW 12167										
	56182	RAPID EXCURSION PACK	026	DOUBLE T		O	1 SZ	350	10.50	3675.00	
				HM HEAT PRESS				350	3.50	1225.00	
CREDIT CARD #: [REDACTED]			TRANSACTION ID:228128435000041311								
We are now sending invoices electronically. To update your email address please call: 1-866-451-1726											

TRACKING # 1ZRV90090210641348
INVOICE DUE 1/21/16
PICK TICKET # 4798633

Discount terms begin from date of invoice. Discounts claimed on payments received after the discount will not be allowed.

Accounts 30 Days or More past due subject to late fees not to exceed 1.5% per month, 18% ANNUAL rate.
SHIPPING TERMS:
FOB shipping point

TOTAL MD	150	4900.00
SHIPPING		
Sales Tax		
INVOICE TOTAL		4900.00

Customer acknowledges that (i) 5.11, Inc's shipping terms are F.O.B. Shipping Point and legal title and risk of loss transfers to the Customer upon delivery by 5.11, Inc of the purchased products to the carrier, (ii) 5.11, Inc (as Customer's agent) has obtained transit insurance on behalf of the Customer listing the customer as an insured party, (iii) in the event of a transit loss, the Customer authorizes 5.11, Inc (as Customer's agent) to assist in negotiating and processing any such claims with the insurance company on the Customer's behalf and (iv) the Customer is fully responsible for all amounts related to purchased products regardless of the amount of available insurance proceeds, if any.

Requests for claims with carriers must be made within 7 days of delivery date for damaged products or 14 days from the shipment date for lost products.

PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll) Sara Phelan

For Statement Date: 2/26/16

Purchasing Card Number (last 4 digits only): [REDACTED]

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory # for items is \$5,000 or less
2-12	4imprint	CIB conference supplies				798.08	
2-18	DMA	Conference booth fees 2015/2016				550.00	
2-19	4imprint	Conference lanyards				916.30	

WI DEPARTMENT OF JUSTICE
BUREAU OF BUDGET & FINANCE

CARD TOTAL

\$2,264.38

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

Cardholder

Date

Supervisor

Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

Div/Bureau P-Card Coordinator

Date

I will

JK

- ja

see email for account info.



U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343



RECEIVED

MAR 09 2016

WISCONSIN DEPT OF JUSTICE
TRAINING & STANDARDS BUREAU

ST OF WI - DOJ

ACCOUNT NUMBER

STATEMENT DATE

02-26-16

TOTAL ACTIVITY

\$ 2,264.38

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT

000000990 1 AV 0.391 106481410621257 P

SARA PHELAN
TAX
DEPT OF JUSTICE CIB
17 W MAIN ST
MADISON WI 53703-3960

Cardholder

Signature _____ Date _____

Approver

Signature _____ Date _____

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
02-15	02-12	4IMPRINT 877-4467746 WI PUR ID: 10894176 TAX: 0.00	24906416043023106344785	5969	798.08
02-19	02-18	DMA E PAY 608-2423232 WI PUR ID: 268021900500001 TAX: 0.00	24717056050130501910707	8299	550.00
02-22	02-19	4IMPRINT 877-4467746 WI PUR ID: cc TAX: 0.00	24906416050023317309619	5969	916.30

Default Accounting Code: 455TS TS028

CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER [REDACTED]		ACCOUNT SUMMARY	
	STATEMENT DATE 02-26-16	DISPUTED AMOUNT \$.00	PREVIOUS BALANCE	\$.00
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	AMOUNT DUE \$ 0.00 DO NOT REMIT		PURCHASES & OTHER CHARGES	\$2,264.38
			CASH ADVANCES	\$.00
			CASH ADVANCE FEE	\$.00
			CREDITS	\$.00
			TOTAL ACTIVITY	\$2,264.38



101 Commerce St
PO Box 320
Oshkosh, WI 54901

www.4imprint.com

877-446-7746

800-355-5043

SARA PHELAN
WISCONSIN DEPT OF JUSTICE
17 W MAIN STREET
DEPT OF JUSTICE/DIV OF LAW
ENF SVCS
MADISON WI 53703

Shipping Address

Sara Phelan
WI Department of Justice
17 West Main Street
Madison, WI 53703
USA
Tel: 608-266-7955

Invoice Number 4109022

Account No. 2509393

Invoice Date August 19, 2015

Account Rep. Carrie Schroeder

Your Order No.

Our Order No. 10894176

Item		Colours (base,trim): Translucent Blue, Translucent Blue			
Qty	Item #	Description	Unit \$	Price \$	Total \$
500	125757-OL	The Clean Sweep	0.5000	250.00	250.00
1	Set-Up Charge	Screen Charge	45.0000	45.00	45.00
		Freight		10.32	10.32
					305.32

Item		Colours (base,trim): Black, Black			
Qty	Item #	Description	Unit \$	Price \$	Total \$
300	126462-OL	Twist Torch LED Mini Flashlight	1.4200	426.00	426.00
1	Set-Up Charge	Screen Charge	45.0000	45.00	45.00
		Freight		21.76	21.76
					492.76

Total Net 798.08

Total Tax 0.00

Grand Total 798.08

Payment via Visa# 9597 -798.08

Balance 0.00



101 Commerce St
PO Box 320
Oshkosh, WI 54901

www.4imprint.com

877-446-7746

800-355-5043

Invoice Number 4109022
Invoice Date August 19, 2015
Your Order No.

Account No. 2509393
Account Rep. Carrie Schroeder
Our Order No. 10894176

Thank You! We appreciate your business.

Any overruns you may have received are yours with our compliments.

- To insure proper credit to your account, please quote "4109022/2509393" on your check or remittance.
- If you are not satisfied with your order, please call 1-800-300-0764. All claims must be made within 5 days of receipt.
- Any questions regarding your invoice? Please call 1-800-982-8979. Our terms are Net 30.
- Please make checks payable to 4imprint

4imprint Federal ID [REDACTED], GSA Contract # [REDACTED]. A Late Payment Charge based on maximum annual percentage allowed by your state law will be applied to this balance owed under this invoice when the invoice becomes past due. The purchaser agrees to pay all of the company's reasonable attorney's fees and any collection agency fees incurred in the collection of any amount owed hereunder and not paid when due. Purchaser agrees to pay any sales or use tax. No credit will be issued for returned merchandise without our consent. This invoice is a conditional acceptance by the seller of the buyer's offer to purchase seller's goods. It may contain terms which differ from or add to those contained in the buyer's purchase order, and to the extent that this is the case, the seller hereby expressly conditions its acceptance of the buyer's offer on the buyer's assent to the additional or different terms. The buyer's receipt and retention of the goods covered by this invoice constitutes acceptance of any such additional or different terms. The buyer and seller agree that any contract hereby entered into has been made and is to be construed according to our State Law.

Please visit our website - www.4imprint.com

Please Remit to:
4imprint, Inc.
25303 Network Place
Chicago, IL 60673-1253



State of Wisconsin

e-Payment Services

[Exit](#)

Confirmation

You must click the "Continue" button below in order to return to the state agency's website.

Please keep a record of your Confirmation Number, or [print this page](#) for your records.

Confirmation Number **WS2DMA001157037**

Payment Details

Description WI Dept of Military Affairs
www.trainingwisconsin.org

Payment Amount \$550.00

Payment Date 02/18/2016

Status PROCESSED

Card ID 7438cbec4fab4a338c7833a7882e8503

Payment Method

Payer Name Sara Phelan

Card Number [REDACTED]

Card Type Visa

Approval Code 002063

Confirmation Email phelansm@doj.state.wi.us

Billing Address

Address 1 17 W Main St

City/Town Madison

State/Province/Region WI

Zip/Postal Code 53703

Country USA

Phelan, Sara M.

From: Laack, Jennifer - DMA [Jennifer.Laack@wisconsin.gov]
Sent: Thursday, February 04, 2016 11:20 AM
To: Phelan, Sara M.
Cc: Oldenburg, Eugene R
Subject: RE: DOJ Payment

Follow Up Flag: Follow up
Flag Status: Completed

Hi Sara,
I will set up a process for you to pay online. If you are okay with paying for the full amount online, that is best. The total then would be \$300.00 for last year's booths, plus \$250.00 for one both this year and 2 additional attendees for a total of \$550.00. You of course have received last year's invoice, but we can send you this years as well for your records. I will let you know when we have a link online that you can use to pay. If you have any other questions, let me know.
Thanks!
Jennifer

From: Phelan, Sara M. [mailto:phelansm@doj.state.wi.us]
Sent: Thursday, February 04, 2016 8:50 AM
To: Laack, Jennifer - DMA
Subject: FW: DOJ Payment

I would like to pay the invoice for both 2015 & 2016 with my pcard, do I just call you with that number?



Sara Phelan
Training Officer - Event Coordinator
Wisconsin Department of Justice
Division of Law Enforcement Services
Training & Standards Bureau
(608) 264-6364

DOJ Exceptional Service Awards
Nomination forms found [here](#)

AG Summit on Public Safety
March 14-16
Kalahari Resort
[Click here](#)

\$150 - T&S
\$400 - Interop.

Phelan, Sara M.

From: Boss, Molly K.
Sent: Friday, April 01, 2016 7:19 AM
To: Phelan, Sara M.
Cc: Fortunato, Dennis J.
Subject: RE: DOJ Payment

It can likely just be charged to the SLIGP account. I've included the accounting string info below. Let me know if you need anything else.

Accounting Details ?

Amount	*GL Unit	Monetary Amount	Currency Code	Exchange Rate	Bud Ref	Fund	Appropriation
15.00	45500	15.00 USD		1.00000000	FY2016	10000	24100

Molly Boss

Program & Policy Analyst- Advanced
Interoperability Unit
Crime Information Bureau
Wisconsin Department of Justice
Division of Law Enforcement Services
Office: (608) 266- 7955
Cell: (608) 381-3050

From: Phelan, Sara M.
Sent: Thursday, March 31, 2016 8:13 PM
To: Fortunato, Dennis J.; Boss, Molly K.
Subject: FW: DOJ Payment

What account should this be charged to. We will cover the \$150 from our booth last year but the rest was maybe Interop?



Sara Phelan
Training Officer - Event Coordinator
Wisconsin Department of Justice
Division of Law Enforcement Services
Training & Standards Bureau
(608) 264-6364

DOJ Exceptional Service Awards
Nomination forms found [here](#)



101 Commerce St
PO Box 320
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746

Free Fax: 800-355-5043

Main Address SARA PHELAN WISCONSIN DEPT OF JUSTICE 17 W MAIN ST MADISON, WI 53703-3960	Invoice Address Sara Phelan Wisconsin Dept of Justice 17 W MAIN ST MADISON WI 53703-3960 USA	Shipping Address Sara Phelan Wisconsin Dept of Justice 17 W MAIN ST MADISON, WI 53703-3960 USA Tel: 608-266-7955
---	--	---

Order Number: 11686101 Order Date: February 12, 2016 Account No.: 2509393	Questions Call: Kimberly Smith Phone: 866-213-1639 Fax: 800-642-2079 Email: ksmith@4imprint.com
--	--

Item		Lanyard with Metal Bulldog Clip - 3/4"		Colors	(Lanyard, Trim): Black, Silver	
Qty	Item #	Description	Unit \$	Price \$	Total \$	
1,000	117242	Lanyard with Metal Bulldog Clip - 3/4"	0.9900	990.00	990.00	
1	Coupon	Coupon Code	-99.0000	-99.00	-99.00	
1	Set-Up Charge	Set-Up Charge	0.0000	0.00	0.00	
		Freight		25.30	25.30	

Artwork Instructions

Product Color (Base, Trim): Black, Silver
Imprint Location: Front - Left & Right
Imprint Colors: White

Grand Total 916.30

Thank you for your order!

If you need to make a change - Please call your account representative. Their name and phone number are shown above.

Shipment Details

Shipment to	Qty	Item #	Estimated Ship Date	Carrier, service	Guaranteed Delivery Date	Freight
Address as above.	1000	117242	Feb 18 2016	UPS Ground (Parcel)	Feb 23 2016	25.30

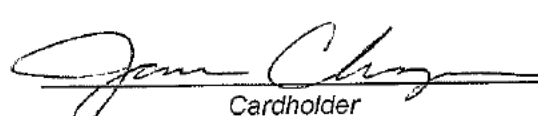
PURCHASING CARD LOG

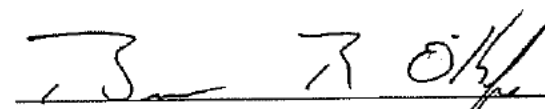
Cardholder (Employee) Name (as shown on payroll) Champion, Jana L.	For Statement Date: 03-11-2016
Purchasing Card Number (last 4 digits only): XXXX XXXX XXXX [REDACTED]	

Receipts are attached in order of occurrence

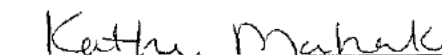
Transaction Date	Vendor Name/City	Items Purchased For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory Number for Items \$5,000 or Less
2/26/2016	Enterprise Rent-a-Car	rental car for JLC - meetings				133.64 /	
2/26/2016	BP	gas for JLC rental car				20.80 /	
3/1/2016	Ashippun BP	gas for JLC rental car				14.88 /	
3/3/2016	harcoslabs.com	blood drops, vampire blood 4 AG summit				177.39 /	
3/3/2016	Enterprise Rent-a-Car	rental car for JLC - meetings				133.64 /	
3/3/2016	Kwik Trip	gas for JLC rental car				16.56 /	
3/8/2016	Ashippin BP	gas for JLC rental car				16.25 /	
3/10/2016	Enterprise Rent-a-Car	rental car for JLC - meetings				218.64	
3/10/2016	Tyranena BP	gas for JLC rental car				18.43	

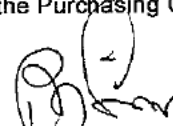
By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

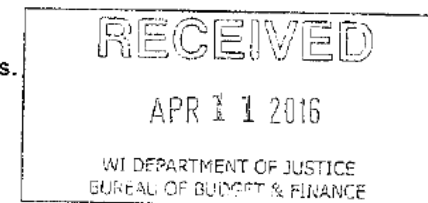

Cardholder
3-24-16
Date


Supervisor
4/6/2016
Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.


Div/Bureau P-Card Coordinator
3-17-2016
Date


4/8/16



PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll) Champion, Jana L.	For Statement Date:
CARD TOTAL \$750.23	

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

Jana Champion 3-24-14
Cardholder Date

Supervisor Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

Kathy Mahurke 3-17-2014
Div/Bureau P-Card Coordinator Date



U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343



ST OF WI - DOJ

STATE OF WISCONSIN
DEPT. OF JUSTICE

2016 MAR 17 A 10:51

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 03-11-16
TOTAL ACTIVITY \$ 750.23

000004762 1 AT 0.416 106481429617099 P

JANA L CHAMPION
TAX [REDACTED] DNAG
STATE CRIME LAB
1578 S 11TH ST
MILWAUKEE WI 53204-2860

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT

Cardholder

Signature _____ Date _____

Approver

Signature _____ Date _____

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
02-29	02-26	BP#61764247-11 #35845 OCONOMOWOC WI PUR ID: 05701031 TAX: 0.00	24122546057740057010314	5542	20.80
02-29	02-26	ENTERPRISE RENT-A-CAR OCONOMOWOC WI D274569	24164076057018111854887	3405	133.64
03-02	03-01	BP#9154030ASHIPPUN BP ASHIPPUN WI PUR ID: 06113045 TAX: 0.78	24122546061740061130458	5542	14.88
03-04	03-03	ENTERPRISE RENT-A-CAR OCONOMOWOC WI D274666	24164076063018112295231	3405	133.64
03-04	03-03	SQ *HARCOS LABS GOSQ.COM NV PUR ID: 0001152921507147668465 TAX: 0.00	24692168063000645478484	5499	177.39
03-07	03-03	KWIK TRIP 41700004176 OCONOMOWOC WI PUR ID: 0000000000000000 TAX: 0.79	24164076064691005870101	5542	16.56
03-09	03-08	BP#9154030ASHIPPUN BP ASHIPPUN WI PUR ID: 08864044 TAX: 0.85	24122546068740068640445	5542	16.25
03-11	03-10	BP#5000104TYRANENA AMOCO LAKE MILLS WI PUR ID: 07062007 TAX: 0.96	24122546070740070620076	5542	18.43
03-11	03-10	ENTERPRISE RENT-A-CAR OCONOMOWOC WI D274776	24164076070018112854186	3405	218.64

Default Accounting Code: 455MILLAB CLAB001

CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER [REDACTED]		ACCOUNT SUMMARY	
	STATEMENT DATE	DISPUTED AMOUNT		
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	03-11-16	\$.00	PREVIOUS BALANCE	\$.00
			PURCHASES & OTHER CHARGES	\$750.23
			CASH ADVANCES	\$.00
			CASH ADVANCE FEE	\$.00
			CREDITS	\$.00
		AMOUNT DUE \$ 0.00 DO NOT REMIT	TOTAL ACTIVITY	\$750.23

Champion, Jana L.

From: Customerservice@enterprise.com
Sent: Friday, February 26, 2016 1:28 PM
To: Champion, Jana L.
Subject: Enterprise Rental Agreement 3NTMZC

WISCONSIN, W359 N5920 BROWN STREET, OCONOMOWOC, WI 530662488 (262) 567-9900

RENTAL AGREEMENT REF#
274569 3NTMZC

RENTER
CHAMPION, JANA

DATE & TIME OUT
02/22/2016 04:04 PM
DATE & TIME IN
02/26/2016 01:22 PM

BILLING CYCLE
24-HOUR

VEH #1 2015 FORD FUSI 1SE4
VIN# 1FA6POH71F5114775
LIC# 1BH586
MILES DRIVEN 546

CLAIM INFO
JD JUSTICE, DEPT. OF

SUMMARY OF CHARGES

Charge Description	Date	Quantity	Per	Rate	Total
TIME & DISTANCE	02/22 - 02/26	4	DAY	\$32.71	\$130.84
REFUELING CHARGE	02/22 - 02/26				\$0.00
Subtotal:					\$130.84
Taxes & Surcharges					
TITLE AND REGISTRATION FEES	02/22 - 02/26	4	DAY	\$0.70	\$2.80
Total Charges:					\$133.64

Total Amount Due

\$0.00

PAYMENT INFORMATION
AMOUNT PAID
\$133.64

TYPE
Visa

CREDIT CARD NUMBER
[REDACTED] PENDING

3P

2-26-2016

\$ 20.80

gas for JIC rental car

WELCOME
6176424

7-11 #35845

N49 W35964

OCONOMOWOC WI

DATE 02/26/16 13:13

PUMP # 01

PRODUCT: BLUE

GALLONS: 12.240

PRICE/G: \$ 1.699

FUEL SALE \$ 20.80

VISA

Auth #: 047765

Ref: 65801031

Resp Code: 000

Term ID: 00001

Stan: 002611096

SITE ID: 6176424

VISA

Stan: 002611096

THANK YOU
HAVE A NICE DAY

Ashippun BP

3-1-2016

\$ 14.88

gas for JLC rental car

ASHIPPUN BP

00009154030
649 N HWY 67

ASHIPPUN BP
ASHIPPUN WI

DUPLICATE OUTDOOR RECEIPT

DATE 03/01/16 15:43
PUMP # 04
PRODUCT: BLUE
GALLONS: 8.761
PRICE/G: \$ 1.699
FUEL SALE \$ 14.88

VISA

Auth #: 030499
Ref: 99813045
Resp Code: 000
Term ID: 00004
Stan: 09171027065

SITE ID: 9154030

VISA

Stan: 09171027065

THANKS, COME AGAIN

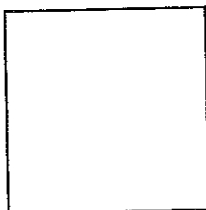
Mahnke, Kathy A.

From: Champion, Jana L.
Sent: Thursday, March 03, 2016 10:06 AM
To: Mahnke, Kathy A.
Subject: FW: Your harcoslabs Order Confirmation (#1344)

Ordered on Pcard for AG's summit

From: harcoslabs [<mailto:nathan@harcoslabs.com>]
Sent: Thursday, March 03, 2016 10:05 AM
To: Champion, Jana L.
Subject: Your harcoslabs Order Confirmation (#1344)

Thanks for Your Order



Your order ID is #1344.

Shipping Address

Jana Champion
WI State Crime Laboratory
1578 S 11th Street
Milwaukee, Wisconsin 53204-2860
United States
4143827500

Billing Address

Jana Champion
WI State Crime Laboratory
1578 S 11th Street
Milwaukee, Wisconsin 53204-2860
United States
4143827500

Your Order Contains...

Cart Items	SKU	Qty	Item Price	Item Total
Dried Blood Drops Energy Candy 3 Pack	00042-R	12	\$5.27 USD	\$63.24 USD
Vampire Blood Lust Gift Pack	22002-R	2	\$44.10 USD	\$88.20 USD

Subtotal: \$151.44 USD

Shipping: \$25.95 USD

Grand Total: \$177.39 USD

Payment Method: Harcos Labs

harcoslabs
<http://shop.harcoslabs.com/>

harcoslabs is powered by Bigcommerce. [Launch your own store for free](#) with Bigcommerce.

3/3/2016

Kwik Trip

3-3-2016

\$ 16.56

gas for JLC rental car

Kwik Trip
1228 Brown St

Oconomowoc
WI 53066
(262) 567-2464

Store #: 417
Ticket: 3021867
Date: 3/3/2016
Time: 3:29:16 PM

CAR WASH CODE:
Code good at this
location only.
Please Use
Within 30 Days.

0XY87
Pump Number 08
Gallons 9.204
Price/Gal \$1.799
Total Fuel \$16.56

Total Sale \$16.56
Visa Purcha \$16.56

TID: RA1094000417806
Appr: 026119

Visa Purchasing
XXXXXXXXXXXX

03/03/2016 15:27:53

I agree to pay the
above Total Amount
according to Card
Issuer Agreement.

Ashippun BP

3-8-2016

\$ 16.25

gas for JLC rental car

WELCOME
9154030
ASHIPPUN BP
649 N HWY 67
ASHIPPUN WI
DATE 03/08/16 16:13
PUMP # 05
PRODUCT: BLUE
GALLONS: 8.739
PRICE/G: \$ 1.859
FUEL SALE \$ 16.25

UISA
XXXXXXXXXXXX
Auth #: 040217
Ref: 17864044
Resp Code: 000
Term ID: 00005
Stan: 09241035106

SITE ID: 9154030

UISA
XXXXXXXXXXXX
Stan: 09241035106

THANK YOU
HAVE A NICE DAY

WISCONSIN, W359 N5920 BROWN STREET, OCONOMOWOC, WI 530662488 (262) 567-9900

RENTAL AGREEMENT REF#
274776 3SK7WG

SUMMARY OF CHARGES

RENTER
CHAMPION, JANA

DATE & TIME OUT
03/07/2016 07:29 AM

DATE & TIME IN
03/10/2016 04:37 PM

BILLING CYCLE
24-HOUR

Charge Description	Date	Quantity	Per	Rate	Total
TIME & DISTANCE	03/07 - 03/10	4	DAY	\$53.96	\$215.84
REFUELING CHARGE	03/07 - 03/10				\$0.00
Subtotal:					\$215.84

Taxes & Surcharges					
TITLE AND REGISTRATION FEES	03/07 - 03/10	4	DAY	\$0.70	\$2.80
Total Charges:					\$218.64

\$0.00

VEH #1 2015 JEEP PATR SPT2 Total Amount Due

VIN# 1C4NJPBA3FD409693

LIC# 372TLX

MILES DRIVEN 491

PAYMENT INFORMATION

AMOUNT PAID TYPE
\$218.64 Visa

CREDIT CARD NUMBER

XXXXXXXXXXXX PENDING

CLAIM INFO

JD JUSTICE, DEPT. OF

Tyrannena BP

3-10-2016

\$ 18.43

gas for JLC rental car

WELCOME
50000104
TYRANENA BP
819 N MAIN ST
LAKE MILLS WI

DATE 03/10/16 15:24
PUMP # 16
PRODUCT: REGUL
GALLONS: 9.707
PRICE/G: \$ 1.899
FUEL SALE \$ 18.43

VISA
XXXXXXXXXXXX
Auth #: 004146
Ref: 46862007
Resp Code: 000
Term ID: 00016
Stan: 0261340574

SITE ID: 5000104

VISA
XXXXXXXXXXXX
Stan: 0261340574

THANK YOU
HAVE A NICE DAY

de Macedo Amarante, Alvaro Roque

From: Champion, Jana L.
Sent: Monday, August 08, 2016 12:32 PM
To: de Macedo Amarante, Alvaro Roque
Subject: RE: Pcard log-Jana Champion-3-11-16

Rocky,

I needed a larger vehicle to haul equipment from one lab to another. That was the best rate they quote me.

Jana

From: de Macedo Amarante, Alvaro Roque
Sent: Monday, August 08, 2016 11:16 AM
To: Champion, Jana L.
Subject: Pcard log-Jana Champion-3-11-16

Hello Jana

I am reviewing your pcard log dated 3-11-16. The enterprise Rent-a-Car charged your pcard a daily rate of \$53.96 on a vehicle you rented on 3/7 to 3/10. Please provide a brief justification for not using the recommended standard vehicle which the daily rate is 32.71.

Thanks

Rocky de Macedo
Wisconsin Department of Justice
Division of Management and Services
Title: Purchasing Agent Objective/Purchasing Card administrator
Telephone: (608) 264-6216
Fax : (608) 266-1656

R

Receipts are attached in order of occurrence

CARD TOTAL \$932.37

Div/Bureau P-Card Coordinator

Cardholder is responsible to obtain a receipt for all purchases and credits.

Ronn —
I will JK
— ja

Instructions to complete Purchasing Card Log

1. Complete your name and the last four (4) digits of your card at the top left section of the form.
2. Complete the statement date in the top right section of the form as listed on your US Bank statement.
3. List all purchases that have been charged to your purchasing card during this statement period. This includes:
 - The transaction date.
 - The name of the vendor.
 - A description of the item purchased.
 - If the purchase was for travel, i.e. hotel costs, provide the purpose of the trip.
 - Include the travel dates, number of lodging nights, room rate.
4. All items listed on this log should include the total cost.
5. If any item requires to be inventoried, provide the assigned inventory number in the last column and on the same line as the purchased item.
6. Attach all receipts to the back of the log in order of occurrence.
7. As the cardholder, sign and date the purchasing card log.
8. Route the log to your supervisor for signature and date.
9. Obtain the division or bureau p-card coordinator approval.
10. Completed log along with all receipts and appropriate signature shall be routed to the Division of Management Services for final auditing and file retention.



PAGE 1 OF 1

Please remember to:

- Enclose your check or money order, payable in U.S. dollars, with this payment coupon, but do not staple or tape them together.
- Write your account number on the front of your check or money order.
- Make checks payable to: Corporate Payment Systems
P.O. Box 790428
St. Louis, MO 63179-0428

Please enter new address or telephone number here:

Name _____

Address _____

City _____

State _____

Zip _____

()
Home Phone

()
Business Phone

CUSTOMER SERVICE 1-800-344-5696

Our Customer Service Representatives are available 24 hours a day, 365 days a year. If you have questions about your Commercial Card account, please call Corporate Payment Systems at 1-800-344-5696 or write to us at Corporate Payment Systems, P.O. Box 6343, Fargo, ND 58125-6343.

MAKING PAYMENTS

The amount shown as Amount Due is payable in full upon delivery of this billing statement.

If an employer is making payment for individual employee cardholders, the employer must provide a single check, or other payment acceptable to Corporate Payment Systems, covering all Amounts Due, as well as a list of account numbers and the dollar amount to be credited to each account.

If individual employee cardholders are responsible for payment, a check, or other payment acceptable to Corporate Payment Systems, for the Amount Due together with the top portion of this billing statement must be mailed by the individual employee to Corporate Payment Systems, P.O. Box 790428, St. Louis, MO 63179-0428.

A payment of less than the Amount Due, but intended to settle an account in full, must be mailed to Corporate Payment Systems, P.O. Box 790428, St. Louis, MO 63179-0428. Accepting a partial payment will not change any agreement between either the individual employee cardholder or the employer and Corporate Payment Systems in any way.

Use the enclosed envelope to mail your payment to Corporate Payment Systems, P.O. Box 790428, St. Louis, MO 63179-0428. All payments by check or money order and accompanied by a payment coupon will be credited to your account on the day of receipt if received at this address by 1:00 p.m. on any banking day. Banking days are all calendar days except Saturday, Sunday and federal holidays. Other payments will be credited to your account within five days of receipt by Corporate Payment Systems.

LOST OR STOLEN CARDS

If a Card is lost or stolen, the individual employee cardholder must call Corporate Payment Systems immediately at 1-800-344-5696 and notify the employer in accordance with the employer's policies and/or instructions.

BILLING INQUIRIES

Before disputing or questioning a charge on your statement, take the following actions:

- Determine if other employees of the corporation / institution may have participated in the transaction.
- Review your receipts for the amount in question as it may have posted to your statement with a different merchant name.
- Attempt to contact the merchant to resolve the issue.

To dispute the transaction, phone Corporate Payment Systems Customer Service at the telephone number on the front of this statement and have the following information available:

- The date and dollar amount of the transaction you are questioning.
- An explanation of why you believe there is an error along with any documentation you may have to support your claim.
- The date you contacted the merchant to attempt to resolve this issue and the merchant's response.

Many inquiries can be corrected over the phone, but phoning alone does not preserve your rights. To preserve your rights, we must receive your written communication no later than 60 days after we sent you the first bill on which the error or problem appeared. Please send a letter with your name, account number and the above information to: CORPORATE PAYMENT SYSTEMS, P.O. BOX 6335, FARGO, ND 58125-6335. You do not have to pay the amount of the charge that is in dispute while we are investigating; however, you are obligated to pay any charges that are not in question. While we investigate your dispute, we cannot report you as delinquent or take any action to collect the amount you question.

When

Monday March 7, 2016 at 8:00 AM CST

-to-

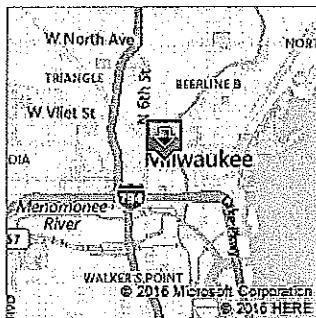
Wednesday March 9, 2016 at 5:00 PM CST

[Add to Calendar](#)**Where**

Hyatt Regency Milwaukee

333 W. Kilbourn Avenue

Milwaukee, WI 53237-2467

[Driving Directions](#)**Contact**

Steve Pederson

Association of SWAT Personnel - Wisconsin

262-309-2911

spederson2@wi.rr.com

2016 ASP-WI Tactical Conference & Vendor Expo

March 7-9, 2016 The Association of SWAT Personnel - Wisconsin (ASP-WI) is proud to announce our 2016 Tactical Operations Conference & Vendor Expo. We have an outstanding lineup of presentations! You don't want to miss this conference! Conference fee: \$245

You have successfully registered for Association of SWAT Personnel - Wisconsin 2016 Tactical Conference & Vendor Expo!

On behalf of the entire Executive Board and Board of Directors, thank you for your support!

Personal Information

First Name:	Ed
Last Name:	Liebrecht
Email Address:	liebrechte@doj.state.wi.us
Country:	United States
Address 1:	17 W. Main Street
City:	Madison
State:	Wisconsin
ZIP Code:	53703
Phone:	608-301-6880

Badge Information

Badge Name:	Ed Liebrecht
-------------	--------------

Business Information

Company:	Wisconsin Department of Justice
Job Title:	Field Representative
Address 1:	17 W. Main Street
City:	Madison
State:	Wisconsin
ZIP Code:	53703
Phone:	608-301-6880
Country:	United States

Payment Summary

Payment Method
Paid By Credit Card

Name	Type	Quantity	Fee	Total
Ed Liebrecht	Event fee	1	\$250.00	\$250.00
TOTAL:				\$250.00

[Go back to Event Page](#)

TRAINING AND/OR TRAVEL REQUEST

This form is not required UNLESS you are attending training, a conference, or if you are travelling out of state.

EMPLOYEE INFORMATION		
Originator of Request (may be different than attendee/traveler) Andrea Waters		Request Date 3/16/2016
Headquarters City Madison, WI	Business Phone Number 608-264-6377	Division/Office DLES

EVENT INFORMATION		
Event Type:	TRAVEL IN-STATE FOR A CONFERENCE OR TRAINING	
Title of Training, Conference, or Meeting ASP-WI Tactical Conference & Vendor Expo	Sponsoring Organization Association of SWAT Personnel	
Location (City & State) Milwaukee, WI	Departure Date 3/7/2016	Return Date 3/9/2016
Reason for Attending (please describe content or subject matter of event and how your attendance would benefit the DOJ) T&S Vendor Booth Staff		Attachments(s) No If yes, forward brochure and/or agenda with request

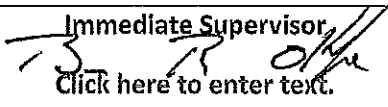
ATTENDEE INFORMATION – PLEASE COPY THIS SECTION AND FILL OUT FOR EACH INDIVIDUAL ATTENDEE/TRAVELER TO ADD MORE THAN ONE ATTENDEE/TRAVELER, SELECT INFORMATION BETWEEN THE TWO ARROWS (→) AND CLICK COPY ON THE HOME TAB OF YOUR RIBBON. CLICK BELOW THIS SECTION (OUTSIDE OF THE TABLE) AND CLICK PASTE ON THE HOME TAB OF YOUR RIBBON. REPEAT THIS FOR EACH ADDITIONAL ATTENDEE/TRAVEL.				
→ Attendee/Traveler Name (please list each attendee/traveler information separately) Ed Liebrecht				
Total Cost estimates – Include ALL costs including costs paid by DOJ, individual, or third party.				
Type of cost	Estimated Amount (Do not use a range)	P-card (Type "yes" if using a P-card for this expense)	Third Party Reimbursement ⁺	
			Name of third party funding this expense. Only if cost is not being paid by DOJ or attendee/traveler	Indicate if the 3rd party is prepaying for the expense or if the DOJ is being reimbursed
Registration Fees	\$250.00	Click here to enter text.	Click here to enter text.	Click here to enter text.
Airfare	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Auto (see rental car note below)	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Lodging (see lodging question below if cost exceeds the allowance for the destination city. Allowances can be found here .)	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Meals	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.

⁺ Employees may not receive payment directly from a third party. Payment must be made to Wisconsin Department of Justice. Allowable expenses will be paid to the employee by WI-DOJ and will be limited to maximum amounts in the UTSA guidelines. Each division is responsible for collection of third party reimbursements.

TRAINING AND/OR TRAVEL REQUEST

Other (please specify) Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Total	\$250.00			
Please explain why a rental car is the most cost efficient mode of transportation.		Click here to enter text.		
If cost of lodging exceeds the allowance for the city please provide an explanation for why this lodging option was used. Allowances can be found here.		Event is at the hotel	No other rooms available	Other:
		Click here to enter text.	Click here to enter text.	Click here to enter text.
Comments	Click here to enter text. ←			

FUNDING SOURCE					
Fund	Appr	Dept	Program	Project (if applicable)	Activity (if applicable)
10000	23200	4550404000 - 7300000	5550	Click here to enter text.	Click here to enter text.

APPROVALS		
Required for all types of requests	Stacy E. Lenz	3/16/2016
Required for all types of requests except free training	Immediate Supervisor  Click here to enter text.	Date 3/21/2016 Click here to enter a date.
	Division Administrator or Designee Click here to enter text.	Date Click here to enter a date.
Required for all Out-of-State Travel	Budget Director	Date

This completed form should be attached electronically to the Travel Expense Report in PeopleSoft when requesting reimbursement. When a P-Card is used for some of the expenses, the completed form should also be attached to the P-Card log.

* Employees may not receive payment directly from a third party. Payment must be made to Wisconsin Department of Justice. Allowable expenses will be paid to the employee by WI-DOJ and will be limited to maximum amounts in the UTSA guidelines. Each division is responsible for collection of third party reimbursements.

Association of **SWAT** Personnel - Wisconsin

2016 Conference & Vendor Expo

Monday, March 7, 2016

0800 - 0945 **Safety is Personal: Lessons Learned as a Survivor of the Virginia Tech Tragedy**

Kristina Anderson, Koshka Foundation

1000 -1200 **Millcreek Murder/Suicide Hostage Incident Debrief**

Jason Mudrock & Jason Gavin
Salt Lake Unified Police Department (Utah)

1200 - 1330 Lunch (Included)

1330 - 1730 **Anatomy of Terrorist Attacks: Lessons Learned from the Charlie Hebdo and Bataclan Theater Attacks and Hostages Incidents in 2015**

Fabrice Cuvillier, Negotiations Chief
Jean-Marc Guraud, Tactical Chief
French National Police RAID

1730 - 1930 Vendor Hospitality

Association of **SWAT** Personnel - Wisconsin **2016 Conference & Vendor Expo**

Tuesday, March 8, 2016

0800 - 1200 **Lessons Learned from the Sandy Hook Active Shooter Incident**

David Delvecchia
Connecticut State Police

1200 - 1330 Lunch (Included)

1330 - 1730 **May 3rd "Draw The Prophet" Terrorist Attack Incident Debrief**

Lieutenant Daniel Colasanto
Garland Police Department (Texas)

1830 - 2130 **Awards Banquet Dinner**
Keynote Speaker: TBD

Association of **SWAT** Personnel - Wisconsin

2016 Conference & Vendor Expo

Wednesday, March 9, 2016

- | | |
|-------------|---|
| 0800 - 1100 | Stockton Bank Heist Gone Bad: Police Response to Robbery and Hostage Situation

Lieutenant Ivan Rose
Stockton Police Department |
| 1100 - 1130 | Lunch (Included) |
| 1130 - 1430 | Washington Navy Yard Active Shooter Incident Debrief

Lieutenant Michael Pulliam
Metropolitan Police Department |
| 1830 - 2130 | Conference Adjourns |



* 1 - 0 0 0 0 *

Shipping Address:
Donna Hahn
17 W. Main Street, 8th Fl
Po Box 7857
Madison, WI 53707-7857

Order number: 84713 Hahn



Order Date: 3/3/2016
Shipping Method: FedEx (36.80lbs) (Fedex Express Saver)
Shipment Weight: 36.800000000000004

Thank you for your order. We hope you are happy with the products and we encourage you to tell us how we can improve. If you'd like to share your purchase experience you can post a product review by going to the product and clicking the button, "Product Reviews." Come back for a repeat purchase and take 10% off your order. To get this discount, enter the word return in the coupon area, on the payment page.



Supply Store
3440 N 16th St #4
Phoenix, Arizona 85016
<http://www.crimescene.com>

Order: 84713 Hahn

Placed: 3/3/2016

Ship To

Donna Hahn
Wisconsin Department Of Justice
17 W. Main Street, 8th Fl
Po Box 7857
Madison, Wisconsin 53707-7857

Bill To

Donna Hahn
Wisconsin Department Of Justice
17 W. Main Street, 8th Fl
Po Box 7857
Madison, Wisconsin 53707-7857

Item #	Name	QTY	Price	Total
11754	Crime Scene Bandages	24	5.50	132.00
SWEEETCSI	Crime Scene Candy	60	3.75	225.00
MURDERPAD	Murder Ink Sticky Notes	12	12.50	150.00
SWEEET-TT	Candy Blood Clots	80	1.25	100.00

Shipment Weight: 36.800000000000004 lbs

Sub Total: 607.00
FedEx (36.80lbs) (Fedex Express Saver):: 75.37
Order Total: 682.37

[My Account \(https://www.crimescene.com/store/index.php?main_page=account\)](https://www.crimescene.com/store/index.php?main_page=account)\$ US Dollar (https://www.crimescene.com/store/index.php?main_page=account_history_info&order_id=84713¤cy=USD)**ORDER #84713****(<http://www.crimescene.com/store/>)**[Home \(https://www.crimescene.com/store/\)](https://www.crimescene.com/store/) > [My Account \(https://www.crimescene.com/store/index.php?main_page=account\)](https://www.crimescene.com/store/index.php?main_page=account) >
[History \(https://www.crimescene.com/store/index.php?main_page=account_history\)](https://www.crimescene.com/store/index.php?main_page=account_history)

Order Date: Thursday 03 March, 2016

ORDER INFORMATION - ORDER #84713

Qty.	Products	Total
80 ea.	Candy Blood Clots	\$100.00
60 ea.	Crime Scene Candy	\$225.00
12 ea.	Murder Ink Sticky Notes	\$150.00
24 ea.	Crime Scene Bandages	\$132.00
		Sub-Total: \$607.00
		FedEx (36.80lbs) (Fedex Express Saver): \$75.37
		Total: \$682.37

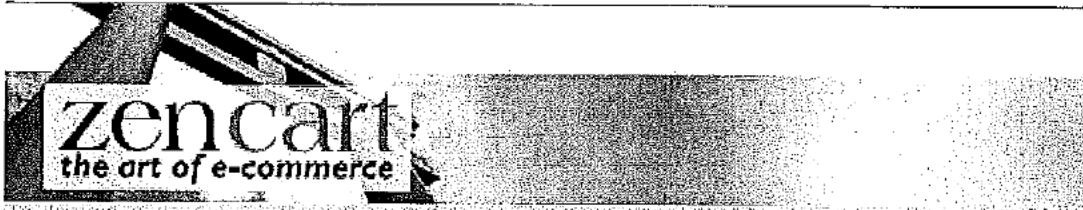
STATUS HISTORY & COMMENTS

Date	Order Status	Comments
03/03/2016	Processing	Transaction ID: 0JA09524X08732648 Payment Type: Credit Card (WPP) Timestamp: 2016-03-03T15:57:20Z Payment Status: Completed AVS Code: A CVV2 Code: M Amount: 682.37 USD
03/03/2016	Processing	

DELIVERY ADDRESSWisconsin Department of Justice
Donna Hahn
17 W. Main Street, 8th Fl<http://www.instantssl.com>

Hahn, Donna G.

From: Crime Scene <tom@crimescene.com>
Sent: Thursday, March 03, 2016 9:57 AM
To: Hahn, Donna G.
Subject: Order Confirmation No: 84713



Order Confirmation

Donna Hahn,
Thanks for shopping with us today!
The following are the details of your order.

Order Number: 84713
Date Ordered: Thursday 03 March, 2016
[Click here for a Detailed Invoice](#)

Products

80 x	Candy Blood Clots (SWEET-TT)	\$100.00
60 x	Crime Scene Candy (SWEETCSI)	\$225.00
12 x	Murder Ink Sticky Notes (MURDERPAD)	\$150.00
24 x	Crime Scene Bandages (11754)	\$132.00

Sub-Total: \$607.00

FedEx (36.80lbs) (Fedex Express Saver): \$75.37

Total: \$682.37

Address Information

Delivery Address

Wisconsin Department of Justice
Donna Hahn
17 W. Main Street, 8th Fl
PO Box 7857
Madison, WI 53707-7857
United States

Shipping Method

FedEx (36.80lbs) (Fedex Express Saver)

Billing Address

Wisconsin Department of Justice
Donna Hahn
17 W. Main Street, 8th Fl
PO Box 7857
Madison, WI 53707-7857
United States

Payment Method

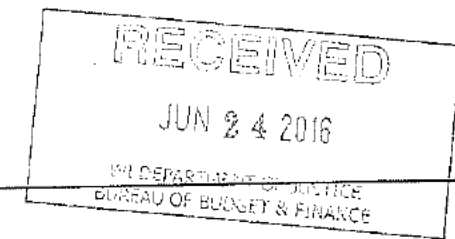
Credit Card

Visa

Copyright (c) 2016 Crime Scene. Powered by Zen Cart

This email address was given to us by you or by one of our customers. If you feel that you have received this email in error, please send an email to tom@crimescene.com
This email is sent in accordance with the US CAN-SPAM Law in effect 01/01/2004. Removal requests can be sent to this address and will be honored and respected.

PURCHASING CARD LOG



Cardholder (Employee) Name (as shown on payroll)

For Statement Date:

Constance Kostelac

3/25/16

Purchasing Card Number (last 4 digits only):

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory # for items is \$5,000 or less
3/17/16	4Imprint	Calculators with BJIA logo for conferences/trainings				349.77 ✓	
3/17/16	4Imprint	Pens with BJIA logo for conferences/trainings				134.26 ✓	
3/17/16	4Imprint	Stress balls with BJIA logo for conferences/trainings				236.39 ✓	
3/18/16	4Imprint	Tumblers with BJIA logo for conferences/trainings				238.63 ✓	

CARD TOTAL \$959.05

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

Constance Kostelac 4/22/16
Cardholder Date

[Signature] 5/4/2016
Supervisor Date

The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

[Signature] 6/23/16

Div/Bureau P-Card Coordinator

Date

Upon receipt of your US Bank statement, the purchasing card log must be completed for that statement period.

Cardholder is responsible to obtain a receipt for all purchases and credits.

Instructions to complete Purchasing Card Log

1. Complete your name and the last four (4) digits of your card at the top left section of the form.
2. Complete the statement date in the top right section of the form as listed on your US Bank statement.
3. List all purchases that have been charged to your purchasing card during this statement period. This includes:
 - The transaction date.
 - The name of the vendor.
 - A description of the item purchased.
 - If the purchase was for travel, i.e. hotel costs, provide the purpose of the trip.
 - Include the travel dates, number of lodging nights, room rate.
4. All items listed on this log should include the total cost.
5. If any item requires to be inventoried, provide the assigned inventory number in the last column and on the same line as the purchased item.
6. Attach all receipts to the back of the log in order of occurrence.
7. As the cardholder, sign and date the purchasing card log.
8. Route the log to your supervisor for signature and date.
9. Obtain the division or bureau p-card coordinator approval.
10. Completed log along with all receipts and appropriate signatures shall be routed to the Bureau of Budget and Finance (BBF) for final auditing and file retention. The approved log must be received in BBF within three (3) weeks of statement date.

de Macedo Amarante, Alvaro Roque

From: Kostelac, Constance A.
Sent: Monday, August 15, 2016 1:07 PM
To: de Macedo Amarante, Alvaro Roque
Subject: RE: Pcard log-Constance Kostelac-Statement 3/25/16

Rocky –

Thanks for the message. It is my understanding that with the low cost of the items purchased we did not need to have multiple quotes. I did review multiple websites to look for the lowest cost items, but the items are often not directly comparable across sites. If more information is needed on this, please let me know.

As for the tax, I just sent a message to 4imprint to find out the process to request the tax refund. I originally thought that we could not do the tax exempt because it was an online order, so I will request the refund per your message below.

Thanks!
Connie



Constance Kostelac, PhD

Director, Bureau of Justice Information and Analysis (BJIA)
Wisconsin Department of Justice
Division of Law Enforcement Services
608-264-9473 (desk)
608-287-6796 (cell)
kostelacca@doj.state.wi.us

From: de Macedo Amarante, Alvaro Roque
Sent: Monday, August 15, 2016 9:09 AM
To: Kostelac, Constance A.
Subject: Pcard log-Constance Kostelac-Statement 3/25/16

I am reviewing your pcard log dated 3/25/16. You purchase several items from 4Imprint containing BJIA logo. Please provide a brief justification for not having at least three quotes for these purchases. 4Imprint also charged you sales tax on these purchases. P-card purchases are exempt of any WI sales tax. Please contact 4Imprint and request refund for the sales tax charged on these purchases. I have attached copy of the log and receipts for reference.
Thanks

Rocky de Macedo
Wisconsin Department of Justice
Division of Management and Services
Title: Purchasing Agent Objective/Purchasing Card administrator
Telephone: (608) 264-6216
Fax : (608) 266-1656



U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343



ST OF WI - DOJ

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 03-25-16
TOTAL ACTIVITY \$ 959.05

000006062 1 AV 0.391 106481449088683 P
CONSTANCE A KOSTELAC
TAX [REDACTED]
DEPARTMENT OF JUSTICE-BJIA
17 W MAIN STREET 4TH FLR
MADISON WI 53703-3960

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT

Cardholder

Signature Constance Kostelac Date 4/22/16

Approver

Signature _____ Date _____

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
03-18	03-17	4IMPRI 877-4467746 WI PUR ID: 11783258 TAX: 37.55	24906416077024184981596	5969	720.42
03-21	03-18	4IMPRI 877-4467746 WI PUR ID: 11783272 TAX: 12.44	24906416078024220257653	5969	238.63

Default Accounting Code: 455DLES DLES005

CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER [REDACTED]		ACCOUNT SUMMARY	
	STATEMENT DATE	DISPUTED AMOUNT		
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	03-25-16	\$.00	PREVIOUS BALANCE	\$.00
			PURCHASES & OTHER CHARGES	\$959.05
			CASH ADVANCES	\$.00
			CASH ADVANCE FEE	\$.00
			CREDITS	\$.00
		AMOUNT DUE \$ 0.00 DO NOT REMIT	TOTAL ACTIVITY	\$959.05

Please remember to:

- Enclose your check or money order, payable in U.S. dollars, with this payment coupon, but do not staple or tape them together.
- Write your account number on the front of your check or money order.
- Make checks payable to: Corporate Payment Systems
P.O. Box 790428
St. Louis, MO 63179-0428

Please enter new address or telephone number here:

Name

Address

City

State

Zip

()
Home Phone

()
Business Phone

CUSTOMER SERVICE 1-800-344-5696

Our Customer Service Representatives are available 24 hours a day, 365 days a year. If you have questions about your Commercial Card account, please call Corporate Payment Systems at 1-800-344-5696 or write to us at Corporate Payment Systems, P.O. Box 6343, Fargo, ND 58125-6343.

MAKING PAYMENTS

The amount shown as Amount Due is payable in full upon delivery of this billing statement.

If an employer is making payment for individual employee cardholders, the employer must provide a single check, or other payment acceptable to Corporate Payment Systems, covering all Amounts Due, as well as a list of account numbers and the dollar amount to be credited to each account.

Individual employee cardholders are responsible for payment, a check, or other payment acceptable to Corporate Payment Systems, for the Amount Due together with the top portion of this billing statement must be mailed by the individual employee to Corporate Payment Systems, P.O. Box 790428, St. Louis, MO 63179-0428.

Payment of less than the Amount Due, but intended to settle an account in full, must be mailed to Corporate Payment Systems, P.O. Box 790428, St. Louis, MO 63179-0428. Accepting a partial payment will not change any agreement between either the individual employee cardholder or the employer and Corporate Payment Systems in any way.

Use the enclosed envelope to mail your payment to Corporate Payment Systems, P.O. Box 790428, St. Louis, MO 63179-0428. All payments by check, money order and accompanied by a payment coupon will be credited to your account on the day of receipt if received at this address by 1:00 p.m. on any banking day. Banking days are all calendar days except Saturday, Sunday and federal holidays. Other payments will be credited to your account within five days of receipt by Corporate Payment Systems.

LOST OR STOLEN CARDS

If a Card is lost or stolen, the individual employee cardholder must call Corporate Payment Systems immediately at 1-800-344-5696 and notify the employer in accordance with the employer's policies and/or instructions.

BILLING INQUIRIES

Before disputing or questioning a charge on your statement, take the following actions:

- Determine if other employees of the corporation / institution may have participated in the transaction.
- Review your receipts for the amount in question as it may have posted to your statement with a different merchant name.
- Attempt to contact the merchant to resolve the issue.

To dispute the transaction, phone Corporate Payment Systems Customer Service at the telephone number on the front of this statement and have the following information available:

- The date and dollar amount of the transaction you are questioning.
- An explanation of why you believe there is an error along with any documentation you may have to support your claim.
- The date you contacted the merchant to attempt to resolve this issue and the merchant's response.

Many inquiries can be corrected over the phone, but phoning alone does not preserve your rights. To preserve your rights, we must receive your written communication no later than 60 days after we sent you the first bill on which the error or problem appeared. Please send a letter with your name, account number and the above information to: CORPORATE PAYMENT SYSTEMS, P.O. BOX 6335, FARGO, ND 58125-6335. You do not have to pay the amount of the charge that is in dispute while we are investigating; however, you are obligated to pay any charges that are not in question. While we investigate your dispute, we cannot report you as delinquent or take any action to collect the amount you question.



Order Confirmation 11783258

Page 1

101 Commerce St
PO Box 320
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746
Free Fax: 800-355-5043

Main Address	Invoice Address	Shipping Address
CONSTANCE KOSTELAC WI DEPARTMENT OF JUSTICE 17 W MAIN ST PO BOX 2718 MADISON, WI 53701-2718	Constance A Kostelac WI Department of Justice 17 W Main Street PO Box 2718 Madison WI 53701-2718 USA	Constance Kostelac WI Department of Justice Bureau of Justice Information 17 W Main St Madison, WI 53701-2718 USA Tel: 6082649473

Order Number: 11783258	Questions Call: Richard Swenson
Order Date: March 05, 2016	Phone: 877-446-7746 Ext. 8531
Account No.: 3508066	Fax: 800-255-0392
	Email: rswenson@4imprint.com

Item	Classic Calculator - Translucent - 24 hr		Colors	(Calculator, Trim): Frosted Blue, Frosted Blue		
Qty	Item #	Description	Unit \$	Price \$	Total \$	
150	7141-T-24HR	Classic Calculator - Translucent - 24 hr	1.8400	276.00	276.00	
1	Coupon	Coupon Code	-35.1000	-35.10	-35.10	
1	Set-Up Charge	Set-Up Charge	35.0000	35.00	35.00	
1	Delivery	24 hr Rush Service	40.0000	40.00	40.00	
		Freight		15.64	15.64	
				Tax	18.23	
					349.77	

Artwork Instructions

Product Color (Base, Trim): Frosted Blue, Frosted Blue
Imprint Location: Above Display
Imprint Colors: White

Item	Cubano Pen - Opaque		Colors	(Barrel, Trim): Blue, Silver		
Qty	Item #	Description	Unit \$	Price \$	Total \$	
250	109148-S	Cubano Pen - Opaque	0.4700	117.50	117.50	
1	Coupon	Coupon Code	-13.2500	-13.25	-13.25	
1	Set-Up Charge	Set-Up Charge	15.0000	15.00	15.00	
		Freight		8.01	8.01	
				Tax	7.00	
					134.26	

Artwork Instructions

Product Color (Base, Trim): Blue, Silver
Imprint Location: Barrel- Beside Clip
Imprint Colors: White

Item	Solid Color Stress Ball		Colors	(Ball, Trim): Blue, Blue		
Qty	Item #	Description	Unit \$	Price \$	Total \$	
150	16018	Solid Color Stress Ball	1.1900	178.50	178.50	
1	Coupon	Coupon Code	-23.8500	-23.85	-23.85	
1	Set-Up Charge	Set-Up Charge	60.0000	60.00	60.00	
		Freight		9.42	9.42	
				Tax	12.32	

**Order Confirmation 11783258**

Page 2

101 Commerce St
PO Box 320
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746
Free Fax: 800-355-5043**Order Number:** 11783258
Order Date: March 05, 2016
Account No.: 3508066**Questions Call:** Richard Swenson
Phone: 877-446-7746 Ext. 8531
Fax: 800-255-0392
Email: rswenson@4imprint.com**Artwork Instructions**Product Color (Base, Trim): Blue, Blue
Imprint Location: Front
Imprint Colors: White

236.39 ✓

Grand Total 720.42 ✓**Thank you for your order!**

If you need to make a change - Please call your account representative. Their name and phone number are shown above.

Shipment Details

Shipment to	Qty	Item #	Estimated Ship Date	Carrier, service	Guaranteed Delivery Date	Freight
Address as above.	150	7141-T-24HR	Mar 08 2016	UPS Ground (Parcel)	Mar 11 2016	15.64
	250	109148-S	Mar 14 2016	UPS Ground (Parcel)	Mar 18 2016	8.01
	150	16018	Mar 10 2016	UPS Ground (Parcel)	Mar 16 2016	9.42



Order Confirmation 11783272

Page 1

101 Commerce St
PO Box 320
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746
Free Fax: 800-355-5043

Main Address	Invoice Address	Shipping Address
CONSTANCE KOSTELAC WI DEPARTMENT OF JUSTICE 17 W MAIN ST PO BOX 2718 MADISON, WI 53701-2718	Constance A Kostelac WI Department of Justice 17 W Main St PO Box 2718 Madison WI 53701-2718 USA	Constance Kostelac WI Department of Justice Bureau of Justice Information 17 W Main St Madison, WI 53701-2718 USA Tel: 6082876796

Order Number: 11783272	Questions Call: Crystal Mayer
Order Date: March 05, 2016	Phone: 877-446-7746 Ext. 8189
Account No.: 3508066	Fax: 866-508-8662
	Email: cmayer@4imprint.com

Item		Sedici Surge Tumbler - 17 oz.		Colors	(base,trim): Green, Green
Qty	Item #	Description	Unit \$	Price \$	Total \$
75	127542-OL	Sedici Surge Tumbler - 17 oz.	2.5000	187.50	187.50
		Freight		38.69	38.69
				<u>Tax</u>	12.44

Artwork Instructions

Product Color (Base, Trim): Green, Green
Imprint Location: Front
Imprint Colors: White

Grand Total 238.63 ✓

Thank you for your order!

If you need to make a change - Please call your account representative. Their name and phone number are shown above.

Shipment Details

Shipment to	Qty	Item #	Estimated Ship Date	Carrier, service	Guaranteed Delivery Date	Freight
Address as above.	75	127542-OL	Mar 15 2016	UPS Ground (Parcel)	Mar 18 2016	38.69



101 Commerce St
PO Box 320
Oshkosh, WI 54901

www.4imprint.com

Toll Free: 877-446-7746
Free Fax: 800-355-5043

Main Address

CONSTANCE KOSTELAC
WI DEPARTMENT OF JUSTICE
17 W MAIN ST
PO BOX 2718
MADISON, WI 53701-2718

Invoice Address

Constance A Kostelac
WI Department of Justice
17 W Main Street
PO Box 2718
Madison WI 53701-2718
USA

Shipping Address

Constance Kostelac
WI Department of Justice
Bureau of Justice Information
17 W Main St
Madison, WI 53701-2718
USA
Tel: 6082649473

Order Number: 11783258
Order Date: March 05, 2016
Account No.: 3508066

Questions Call: Richard Swenson
Phone: 877-446-7746 Ext. 8531
Fax: 800-255-0392
Email: rswenson@4imprint.com

Item		Classic Calculator - Translucent - 24 hr		Colors	(Calculator, Trim): Frosted Blue, Frosted Blue	
Qty	Item #	Description	Unit \$	Price \$	Total \$	
150	7141-T-24HR	Classic Calculator - Translucent - 24 hr	1.8400	276.00	276.00	
1	Coupon	Coupon Code	-35.1000	-35.10	-35.10	
1	Set-Up Charge	Set-Up Charge	35.0000	35.00	35.00	
1	Delivery	24 hr Rush Service	40.0000	40.00	40.00	
		Freight		15.64	15.64	
				Tax	18.23	
					349.77	

Artwork Instructions

Product Color (Base, Trim): Frosted Blue, Frosted Blue
Imprint Location: Above Display
Imprint Colors: White

Item Cubano Pen. - Opaque			Colors (Barrel, Trim): Blue, Silver		
Qty	Item #	Description	Unit \$	Price \$	Total \$
250	109148-S	Cubano Pen - Opaque	0.4700	117.50	117.50
1	Coupon	Coupon Code	-13.2500	-13.25	-13.25
1	Set-Up Charge	Set-Up Charge	15.0000	15.00	15.00
		Freight		8.01	8.01
				Tax	7.00
					134.26

Artwork Instructions

Product Color (Base, Trim): Blue, Silver
Imprint Location: Barrel- Beside Clip
Imprint Colors: White

Item		Solid Color Stress Ball		Colors	(Ball, Trim): Blue, Blue	
Qty	Item #	Description	Unit \$	Price \$	Total \$	
150	16018	Solid Color Stress Ball	1.1900	178.50	178.50	
1	Coupon	Coupon Code	-23.8500	-23.85	-23.85	
1	Set-Up Charge	Set-Up Charge	60.0000	60.00	60.00	
		Freight		9.42	9.42	
				Tax	12.32	

PURCHASING CARD LOG

Cardholder (Employee) Name (as shown on payroll) Donna G Hahn	For Statement Date: 04-22-16
Purchasing Card Number (last 4 digits only): XXXX	

Receipts are attached in order of occurrence

Transaction Date	Vendor Name/City	Items Purchased. For Travel, Purpose of Trip	Depart/Return Dates for Air Travel Charges	Number of Nights	Room Rate	Total Cost	Inventory Number for items is \$5,000 or less
04-08	Staples/MI	Office Supplies				\$85.21	
04-13	Staples/MI	Office Supplies				\$20.58	
04-14	Amazon/WA	Otter Case/Jimenez Box	Interop			\$25.28	
04-19	Crime Scene/AZ	Outreach Supplies	20100 4550403010 4270			\$229.41	
04-19	Crime Scene/AZ	Outreach Supplies	20100 455040 3010 4270			\$28.50	
04-20	Staples/MI	Office Supplies/ Calendar Jimenez	Interop			\$8.91	
04-20	Staples/MI	Gloves/ Drug Take Back	DTB			\$34.80	
04-20	Staples/MI	Office Supplies/Gloves/ Drug Take Back	DTB			\$21.90	
04-20	Staples/MI	Office Supplies/Drug Take Back	DTB			\$2.25	
04-20	Michaels/Middleton	Office Supplies	AG			\$13.99	

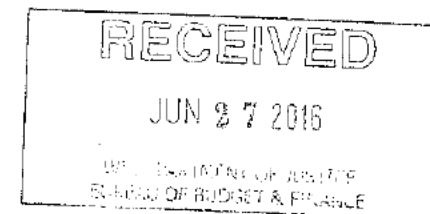
CARD TOTAL \$470.83

By signing below, the Cardholder and Supervisor certify these charges are for state business purposes only and in full compliance with the Purchasing Card Manual.

<u>Donna G Hahn</u> Cardholder	<u>5/9/16</u> Date	<u>T S R Oly</u> Supervisor	<u>5/9/2016</u> Date
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The P-Card Coordinator certifies the log and receipts are in compliance with the Purchasing Card Manual guidelines.

<u>[Signature]</u> Div/Bureau P-Card Coordinator	<u>6/27/16</u> Date
---	------------------------





Order#	Ship Date	Order Date	Master Number
0143974797-000-001	04/07/2016	04/07/2016	0001817305
Deliver to	Phone#	Ordered by	
DONNA HAHN	608-2665710-55555	HAHNDG@DOJ.STATE.WI.US	
Budget Center	Purchase Order#	Release#	
W0024724	W0024724		

Ship to **RISSE**: ST OF WI
 17 W MAIN ST
 8TH FLOOR' DLES/BBF
 MADISON, WI 53703

CREDIT CARD RECEIPT

Order Line#	SKU	Product Description	Budget Center	Order UOM	Qty Ord	Qty Ship	Unit Price	Extended Price
1	562903	POST-IT SUPER STICKY NOTES' 4"	W0024724	PK	1	1	\$9.85	\$9.85
2	631345	POST-IT RECYCLED SUPER STICKY	W0024724	PK	1	1	\$10.48	\$10.48
3	873986	POST-IT NOTES' 4" X 6" JAIPUR	W0024724	PK	1	1	\$6.67	\$6.67
4	483081	POST-IT NOTES' 4" X 6" CAPE T	W0024724	PK	1	1	\$6.67	\$6.67
5	562881	POST-IT SUPER STICKY NOTES' 4"	W0024724	PK	1	1	\$6.83	\$6.83
6	490943	POST-IT NOTES' 4" X 6" MARSEI	W0024724	PK	1	1	\$9.55	\$9.55
7	461375	UNI-BALL VISION ELITE ROLLER B	W0024724	DZ	1	1	\$19.66	\$19.66
9	164208	LYSOL DISINFECTING WIPES LEMON	W0024724	PK	1	1	\$15.50	\$15.50

Subtotal	\$85.21
Freight/Misc Charges	\$0.00
Tax	\$0.00

Last 4 Digits of Credit Card:	Amount Paid via Credit Card	\$85.21
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U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343



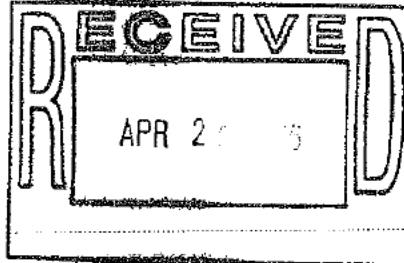
ST OF WI - DOJ

ACCOUNT NUMBER [REDACTED]
STATEMENT DATE 04-22-16
TOTAL ACTIVITY \$ 470.83

000003291 1 AV 0.376 106481483377101 P

DONNA G HAHN
TAX [REDACTED]
WI DEPT OF JUSTICE TS
17 W. MAIN ST.
MADISON WI 53703-3960

"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT



Cardholder Signature _____ Date _____
Approver Signature _____ Date _____

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
04-11	04-08	STAPLS0143974797000001 877-8267755 MI PUR ID: W0024724 TAX: 0.00	24164076099105074889198	5111	85.21 ✓
04-14	04-13	STAPLS0143974797000002 877-8267755 MI PUR ID: W0024724 TAX: 0.00	24164076104105974889192	5111	20.58 ✓
04-15	04-14	AMAZON.COM AMZN.COM/BILL WA PUR ID: 112-1348714-33954 TAX: 0.00	24692166105000166736765	5942	25.28 ✓
04-20	04-19	CRIME SCENE 623-565-8573 AZ PUR ID: 86148948 TAX: 0.00	24492156110894861489480	5310	229.41 ✓
04-20	04-19	PP*CRIME SCENE 402-935-2244 AZ PUR ID: 4T4222YE3EAQY TAX: 0.00	24492156110894870509872	5310	28.50 ✓
04-21	04-20	STAPLS0144311502000001 877-8267755 MI PUR ID: W0025400 TAX: 0.00	24164076111105191442917	5111	8.91 ✓
04-21	04-20	STAPLS0144311502000004 877-8267755 MI PUR ID: W0025400 TAX: 0.00	24164076111105951442917	5111	34.80 ✓
04-21	04-20	STAPLS0144311502000003 877-8267755 MI PUR ID: W0025400 TAX: 0.00	24164076111105961442915	5111	21.90 ✓
04-21	04-20	STAPLS0144311502000002 877-8267755 MI PUR ID: W0025400 TAX: 0.00	24164076111105971442913	5111	2.25 ✓

Default Accounting Code: 455TS TS017

CUSTOMER SERVICE CALL 800-344-5696	ACCOUNT NUMBER <div></div>		ACCOUNT SUMMARY	
	STATEMENT DATE	DISPUTED AMOUNT	PREVIOUS BALANCE	\$.00
SEND BILLING INQUIRIES TO: C/O U.S. BANCORP SERVICE CENTER, INC U.S. BANK NATIONAL ASSOCIATION P.O. BOX 6335 FARGO, ND 58125-6335	04-22-16	\$.00	PURCHASES & OTHER CHARGES	\$470.83
	AMOUNT DUE \$ 0.00 DO NOT REMIT		CASH ADVANCES	\$.00
			CASH ADVANCE FEE	\$.00
			CREDITS	\$.00
			TOTAL ACTIVITY	\$470.83



Account Name:	DONNA G HAHN
Company Name:	ST OF WI - DOJ
Account Number:	
Statement Date:	04-22-16

NEW ACCOUNT ACTIVITY

POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
04-21	04-20	MICHAELS STORES 3745 MIDDLETON WI PUR ID: 3745000574071604201328 TAX: 0.00	24692166112000795811493	5970	13.99



Order#	Ship Date	Order Date	Master Number
0143974797-000-002	04/13/2016	04/07/2016	0001817305
Deliver to	Phone#	Ordered by	
DONNA HAHN	608-2665710-55555	HAHNDG@DOJ.STATE.WI.US	
Budget Center	Purchase Order#	Release#	
W0024724	W0024724		

Ship to **RISSE**: ST OF WI
17 W MAIN ST
8TH FLOOR' DLES/BBF
MADISON, WI 53703

CREDIT CARD RECEIPT

Order Line#	SKU	Product Description	Budget Center	Order UOM	Qty Ord	Qty Ship	Unit Price	Extended Price
8	1722306	UNI-BALL VISION ELITE PENS' 0.	W0024724	PK	1	1	\$20.58	\$20.58

Subtotal	\$20.58
Freight/Misc Charges	\$0.00
Tax	\$0.00

Last 4 Digits of Credit Card:	Amount Paid via Credit Card	\$20.58
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amazon.com



SDpMYNX0qH

Your order of April 13, 2016 (Order ID 112-1348714-3395446)

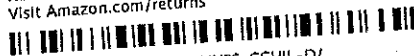
Qty.	Item	Item Price	Total
1	OtterBox Defender Series 4.7-Inch Case for iPhone 6, Crushed Damson (77-50209) Wireless Phone Accessory (** P-1-Q1018123 **) 800NNC9GVQ 660543352709	\$25.28	\$25.28

This shipment completes your order.

Have feedback on how we
packaged your order? Tell us at
www.amazon.com/packaging.

Return or replace your item
Visit Amazon.com/returns

Subtotal	\$25.28
Order Total	\$25.28
Paid via credit/debit	\$25.28
Balance due	\$0.00



7/DpMYNX0qH/-1 of 1-//UPS-CCHIL-D/
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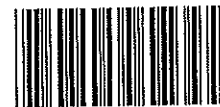
BA8



* 1 - 0 0 0 0 *

Shipping Address:
Donna Hahn
17 W. Main Street, 8th Fl
Po Box 7857
Madison, WI 53707-7857

Order number: 85274 Hahn



* 4 6 - 4 1 *



* 8 5 2 7 4 *

Order Date: 4/19/2016
Shipping Method: FedEx (12.00lbs) (Fedex 2 Day)
Shipment Weight:

Thank you for your order. We hope you are happy with the products and we encourage you to tell us how we can improve. If you'd like to share your purchase experience you can post a product review by going to the product and clicking the button, "Product Reviews." Come back for a repeat purchase and take 10% off your order. To get this discount, enter the word return in the coupon area, on the payment page.

Customer Notes: ADD 6 SANDWICH BOXES MUST HAVE BY APRIL 26



* 8 5 2 7 4 *

Supply Store

3440 N 16th St #4
Phoenix, Arizona 85016
<http://shop.crimescene.com>

Order: 85274 Hahn

Placed: 4/19/2016

Ship To

Donna Hahn
Wisconsin Department Of Justice
17 W. Main Street, 8th Fl
Po Box 7857
Madison, Wisconsin 53707-7857

Bill To

Donna Hahn
Wisconsin Department Of Justice
17 W. Main Street, 8th Fl
Po Box 7857
Madison, Wisconsin 53707-7857

Item #	Name	QTY	Price	Total
11754	Crime Scene Bandages	6	5.50	33.00
SWEETCSI	Crime Scene Candy	30	3.75	112.50
SWEET-TT	Candy Blood Clots	30	1.25	37.50

Sub Total: 183.00
FedEx (12.00lbs) (Fedex 2 Day):: 46.41
Order Total: 229.41

Shipment Weight: lbs

[My Account \(https://www.crimescene.com/store/index.php?main_page=account\)](https://www.crimescene.com/store/index.php?main_page=account)\$ US Dollar (https://www.crimescene.com/store/index.php?main_page=account_history_info&order_id=85274¤cy=USD)**ORDER #85274****(<http://www.crimescene.com/store/>)**[Home \(https://www.crimescene.com/store/\)](https://www.crimescene.com/store/) > [My Account \(https://www.crimescene.com/store/index.php?main_page=account\)](https://www.crimescene.com/store/index.php?main_page=account) > [History \(https://www.crimescene.com/store/index.php?main_page=account_history\)](https://www.crimescene.com/store/index.php?main_page=account_history)

Order Date: Tuesday 19 April, 2016

ORDER INFORMATION - ORDER #85274

Qty.	Products	Total
6 ea.	Crime Scene Bandages	\$33.00
30 ea.	Crime Scene Candy	\$112.50
30 ea.	Candy Blood Clots	\$37.50

Sub-Total: \$183.00

FedEx (12.00lbs) (Fedex 2 Day): \$46.41

Total: \$229.41

STATUS HISTORY & COMMENTS

Date	Order Status	Comments
04/19/2016	Processing	

04/19/2016 Processing

Transaction ID: 7AD940952C6185710
Payment Type: Credit Card (WPP)
Timestamp: 2016-04-19T14:06:25Z
Payment Status: Completed
AVS Code: A
CVV2 Code: M
Amount: 229.41 USD

DELIVERY ADDRESS

Wisconsin Department of Justice
Donna Hahn

17 W. Main Street, 8th Fl
PO Box 7857
Madison, WI 53707-7857

<http://www.instantssl.com>

Hahn, Donna G.

From: Crime Scene <tom@crimescene.com>
Sent: Friday, May 06, 2016 5:02 PM
To: Hahn, Donna G.
Subject: Your order: 85274

Invoice

Supply Store

3440 N 16th St #4
Phoenix, Arizona 85016
623-565-8573
<http://shop.crimescene.com>

Order: 85274
Placed: 4/19/2016
Shipping: FedEx (12.00lbs) (Fedex 2 Day)

Ship To

Donna Hahn
Wisconsin Department Of Justice
17 W. Main Street, 8th Fl
Po Box 7857
Madison, Wisconsin 53707-7857
608-266-5710
hahndg@doj.state.wi.us

Bill To

Donna Hahn
Wisconsin Department Of Justice
17 W. Main Street, 8th Fl
Po Box 7857
Madison, Wisconsin 53707-7857
608-266-5710
hahndg@doj.state.wi.us

Item #	Name	QTY	Price	Total
11754	Crime Scene Bandages	6	5.50	33.00
SWEETCSI	Crime Scene Candy	30	3.75	112.50
SWEET-TT	Candy Blood Clots	30	1.25	37.50
	SANDWICH BOXES	6	4.75	28.50

Subtotal: 211.50
FedEx (12.00lbs) (Fedex 2 Day):: 46.41
Order Total: 257.91

Order Information

Shipping

Shipped on 4/22/2016 using FedEx 2Day®: 782900741448

Notes

None

Thank you!

Thank you for your purchase from Supply Store!
If you have questions about your order please visit us online at <http://shop.crimescene.com> or email us at tom@crimescene.com.



Solve a crime online: [Now investigating the Real Estate Rancor case](#)
Shop for crime scene supplies: [Forensic Supply Store](#)



Order#	Ship Date	Order Date	Master Number
0144311502-000-001	04/19/2016	04/19/2016	0001817305
Deliver to	Phone#	Ordered by	
DONNA HAHN	608-2665710-55555	HAHNDG@DOJ.STATE.WI.US	
Budget Center	Purchase Order#	Release#	
W0025400	W0025400		

Ship to **RISSE**: ST OF WI
 17 W MAIN ST
 8TH FLOOR' DLES/BBF
 MADISON, WI 53703

CREDIT CARD RECEIPT

Order Line#	SKU	Product Description	Budget Center	Order UOM	Qty Ord	Qty Ship	Unit Price	Extended Price
1	1586368	AT-A-GLANCE 2016 WATERCOLORS W	W0025400	EA	1	1	\$8.91	\$8.91

Subtotal	\$8.91
Freight/Misc Charges	\$0.00
Tax	\$0.00

Last 4 Digits of Credit Card:	Amount Paid via Credit Card	\$8.91
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Order#	Ship Date	Order Date	Master Number
0144311502-000-004	04/19/2016	04/19/2016	0001817305
Deliver to	Phone#	Ordered by	
DONNA HAHN	608-2665710-55555	HAHNDG@DOJ.STATE.WI.US	
Budget Center	Purchase Order#	Release#	
W0025400	W0025400		

Ship to RISSE: ST OF WI
17 W MAIN ST
8TH FLOOR DLES/BBF
MADISON, WI 53703

CREDIT CARD RECEIPT

Order Line#	SKU	Product Description	Budget Center	Order UOM	Qty Ord	Qty Ship	Unit Price	Extended Price
5	1035227	MEMPHIS GLOVE FASGUARD CLARINO	W0025400	PR	3	3	\$5.80	\$17.40
6	1035226	MEMPHIS GLOVE FASGUARD CLARINO	W0025400	PR	3	3	\$5.80	\$17.40

Subtotal	\$34.80
Freight/Misc Charges	\$0.00
Tax	\$0.00

Last 4 Digits of Credit Card:	Amount Paid via Credit Card	\$34.80
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Order#	Ship Date	Order Date	Master Number
0144311502-000-003	04/19/2016	04/19/2016	0001817305
Deliver to	Phone#	Ordered by	
DONNA HAHN	608-2665710-55555	HAHNDG@DOJ.STATE.WI.US	
Budget Center	Purchase Order#	Release#	
W0025400	W0025400		

Ship to RISSE: ST OF WI
 17 W MAIN ST
 8TH FLOOR' DLES/BBF
 MADISON, WI 53703

CREDIT CARD RECEIPT

Order Line#	SKU	Product Description	Budget Center	Order UOM	Qty Ord	Qty Ship	Unit Price	Extended Price
3	132741	POST-IT FULL ADHESIVE ROLL' 1"	W0025400	EA	1	1	\$2.25	\$2.25
4	MMM2650P	POST-IT FULL ADHESIVE ROLL' PI	W0025400	EA	1	1	\$2.25	\$2.25
7	1035225	MEMPHIS GLOVE FASGUARD CLARINO	W0025400	PR	3	3	\$5.80	\$17.40

Subtotal	\$21.90
Freight/Misc Charges	\$0.00
Tax	\$0.00

Last 4 Digits of Credit Card:	Amount Paid via Credit Card	\$21.90
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Order#	Ship Date	Order Date	Master Number
0144311502-000-002	04/19/2016	04/19/2016	0001817305
Deliver to	Phone#	Ordered by	
DONNA HAHN	608-2665710-55555	HAHNDG@DOJ.STATE.WI.US	
Budget Center	Purchase Order#	Release#	
W0025400	W0025400		

Ship to **RISSE**: ST OF WI
17 W MAIN ST
8TH FLOOR' DLES/BBF
MADISON, WI 53703

CREDIT CARD RECEIPT

Order Line#	SKU	Product Description	Budget Center	Order UOM	Qty Ord	Qty Ship	Unit Price	Extended Price
2	885361	POST-IT SUPER STICKY REMOVABLE	W0025400	RL	1	1	\$2.25	\$2.25

Subtotal \$2.25
Freight/Misc Charges \$0.00
Tax \$0.00

Last 4 Digits of Credit Card:	Amount Paid via Credit Card	\$2.25
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Michael's

Where Creativity Happens™

MICHAELS STORE #3745 (608)824-8959

1700 DEMMING WAY STE. 120
MIDDLETON, WI 53562

** Return Barcode **

8-9541-7495-5555-2011-9111-6116-1343-3813



2009 SALE 7407 3745 005 4/20/16 13:28

CARDS/ENV LRG WHT 400100671986 9.99 @ 9.99 N
(RETURN VALUE 6.99)

CARDS/ENV LRG WHT 400100671986 9.99 @ 9.99 N
(RETURN VALUE 7.00)

30% OFF DISCOUNTABLE PURCH 5.99-

99 NONTAXABLE TOTAL

AMOUNT QUALIFIED FOR DISCOUNT: \$ 19.98

Coupon(s) Applied:

400100451588 30% ENTIRE

TOTAL 13.99

ACCOUNT NUMBER

Visa

13.99

APPROVAL: 085376 CHIP ONLINE

Application Label VISA CREDIT

AID: A000000003101001

TVR: 0080008000

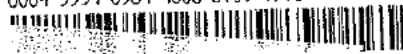
TSI: E800

This receipt expires at 180 days on 10/22/16

8-9541-7495-5555-2011-9111-6116-1343-3813

YOU SAVED \$ 5.99

0004-9994-0964-4306-3101-1916-3841-383



de Macedo Amarante, Alvaro Roque

From: de Macedo Amarante, Alvaro Roque
Sent: Friday, September 02, 2016 1:34 PM
To: Hahn, Donna G.
Subject: Pcard log-Donna Hahn-statement 4/22/16

Hi Donna

You purchased office supplies through Michael's in Middleton. Office supplies must be purchased through vendors listed under the state mandatory contract for office supplies. Michael's is not listed under the state mandatory contract for office supplies. You can also use WISBuy when making purchases with pcard. Items and vendors in WISbuy are already approved for pcard purchase.

Thanks

Rocky de Macedo
Wisconsin Department of Justice
Division of Management and Services
Title: Purchasing Agent Objective/Purchasing Card administrator
Telephone: (608) 264-6216
Fax : (608) 266-1656

de Macedo Amarante, Alvaro Roque

From: Hahn, Donna G.
Sent: Tuesday, September 06, 2016 11:17 AM
To: de Macedo Amarante, Alvaro Roque
Cc: Varese, Darcey L.
Subject: RE: Pcard log-Donna Hahn-statement 4/22/16

Rocky,

The items purchased at Michael's in Middleton have been preauthorized as retirement materials for coasters and for cards that the AG uses which are not available thru Staples or the state mandatory contract for office supplies. They are a special size which come with the envelope for printing the DOJ/AG logo from the color copier.

If you would like the items listed a different way on the pcard statement by all means let me know and I will do so.

Thank you.

Donna Hahn
Executive Staff Assistant
Division of Law Enforcement Services
Department of Justice
608-266-5710-W
608-630-7516-C



DOSE OF REALITY
PREVENT PRESCRIPTION PAINKILLER ABUSE IN WISCONSIN.

From: de Macedo Amarante, Alvaro Roque
Sent: Friday, September 02, 2016 1:34 PM
To: Hahn, Donna G. <hahndg@doj.state.wi.us>
Subject: Pcard log-Donna Hahn-statement 4/22/16

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Thanks

Rocky de Macedo
Wisconsin Department of Justice
Division of Management and Services