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SUITE 815  
TALLAHASSEE, FLORIDA 32301

(850) 412-2002  
FAX: (850) 412-1302  
MARGARET-RAY.KEMPER@RUDEN.COM

August 12, 2010

Ann Cole, Commission Clerk  
Division of Commission Clerk  
and Administrative Services  
Florida Public Service Commission  
2540 Shumard Oak Boulevard  
Tallahassee, FL 32399-0850

090477-W  
NO AUG 13 AM 9:53  
RECEIVED-FPSC  
COMMISSION CLERK

Re: Docket No. 090477-WS  
In Re: CWS Communities L.P. d/b/a Palm Valley Utilities

Dear Ms. Cole:

This is in response to the list of additional questions forwarded on July 20, 2010, to CWS Communities, L.P. d/b/a Palm Valley Utilities by the Office of Public Counsel.

- 1. Summary, in the form of copies of work orders, of major additions to the plant reuse system.

Enclosed, as requested, are copies of invoices from 2004 to 2007 for costs incurred in connection with construction of the reuse system during that time period.

- 2. Description of costs associated with operating a reuse plant compared to other effluent disposable methods.

As explained in the response to question 3 below, the only feasible option was to use spray irrigation. Therefore, comparing the operating costs of using reuse to other alternative treatment methods is without merit. CWS Communities has provided, and FPSC staff have audited, the operating costs that are relevant to this case.

- 3. Reasons for installing a reuse system.

In 1994, prior to ownership of the park by CWS Communities, the Palm Valley Mobile Home utility had entered into a consent order with the Florida Department of Environmental Protection ("FDEP") that required repair of the existing effluent disposal system. The consent order required the utility to achieve a wet weather disposal capacity of 126,000 gallons per day ("gpd"). Attempts initially were made to address the effluent

RM:7553807:6

NOV 13 10 31 AM '10  
FPSC COMMISSION CLERK

disposal system issues by installing a drip line discharge system. These efforts, however, were unsuccessful and the consent order was amended in 1999. The amended consent order required the utility to modify substantially the wastewater treatment plant's disposal system in such a way as to repair or eliminate a portion of the drip line system and to improve the system to handle the existing discharge flows. See enclosed Provision 11. of the 1999 Consent Order, OGC File No. 94-1144B.

This effort to improve the utility's existing wastewater treatment methods occurred during a time frame when the number of units in the park was being increased as well. Due to expansion of the number of units in the park, an increase in disposal capacity from 126,000 gpd to 150,000 gpd was needed for the wastewater treatment facility. Hence, not only was it necessary to design treatment methods that would resolve the existing regulatory issues, it also was necessary to expand the existing treatment capacity of the system. The existing treatment methods using drip line discharges and percolation ponds could not meet existing requirements and certainly would not adequately address the expansion requirements.

The property on which the park is located has a high water table and consists of marginal soils for purposes of effluent disposal. There are, in fact, several wetlands areas located on or near the property. The wastewater treatment plant itself is constructed adjacent to a wetlands area. Analysis of the existing effluent disposal systems concluded that the existing systems did not have the capacity to provide effluent disposal to resolve the existing regulatory issues, much less the proposed expansion. This conclusion also is evident based upon the modification of the consent order that occurred in 1999. Therefore, the intent in providing a solution to the regulatory compliance and effluent disposal for the expansion was to develop a cost effective means of achieving effluent disposal.

All of the then existing effluent disposal systems were used in achieving the necessary capacity of 150,000 gallons per day. Since the existing systems fell significantly short of this goal, additional effluent disposal systems were developed. An exfiltration trench, a wet-weather/percolation pond, and irrigation systems were the three available and feasible additional alternatives. Therefore, the facility was permitted utilizing the existing effluent disposal systems and adding these three new systems. Every attempt was made to use the least costly effluent disposal alternatives. However, in the end, without an irrigation component, an effective effluent disposal strategy was not achievable. Given the hydrological conditions of the property and the need to expand the system, the only feasible disposal method that could be used to meet FDEP regulatory requirements was to add a reuse system component, along with an exfiltration trench and a pond, which would enable the utility to discharge the wastewater and remain in compliance with the FDEP requirements.

Because spray irrigation was an essential available and feasible component of the overall strategy for resolving the wastewater discharge issues in the community, treatment to reuse standards, and, therefore, installation of a reuse system, was necessary so that the water could be disposed of using spray irrigation. Moreover, it also was obvious that the most economically feasible method for incorporating a reuse spray irrigation system in the community was to use common areas and home sites for irrigation purposes. To purchase additional land—assuming nearby suitable non-wetland areas even could be acquired—would have been economically prohibitive. This was the only economically and technically feasible way to meet regulatory requirements.

The use of reclaimed water also was required by the consumptive use permit issued to the utility at that time. Specifically, the St. John's Water Management District Permit No. 20117-0042UNM2R, which was issued in July 1994 and which expired in July 2001 (i.e., during the time frame when the wastewater disposal issues were being addressed and new treatment systems were being designed), contained a specific provision that stated that treated effluent must be used as irrigation water when it became available and economically feasible.

Encouraging the use of reclaimed water has long been the policy of water agencies in the State of Florida. It is, in fact, recognized policy of the Florida Public Service Commission and was discussed in the 2002 staff-assisted rate case proceeding for this facility. In that proceeding, the Commission specifically stated that "We recognize the need to promote reuse and that it is a valuable water source which should not be wasted." See, e.g., *In re: Application for staff-assisted rate case in Seminole County by CWS Communities LP d/b/a Palm Valley*, Docket No. 010823; Order No. PSC-02-1111-PAA-WS, issued August 13, 2002, p. 12. (Hereinafter, 2002 SARC Order.)

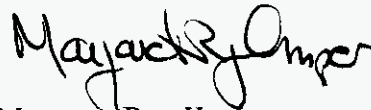
Finally, the prior staff-assisted rate case for this utility which occurred in 2002 specifically addressed the same reclaimed water system that the Office of Public Counsel and intervenors apparently are seeking to revisit in this staff-assisted rate case. The reclaimed water system addressed in the 2002 staff-assisted rate case consisted of:

filtration; high level disinfection; 30,000 gallons reclaimed water pump station; a 3-way automatic diverter valve; a 150,000 gallons reject pond; an 800,000 gallon wet weather storage/rapid infiltration basin with a disposal capacity of 17,000 gpd; a 35,000 gpd decorative pond; an 8,483 gpd clubhouse irrigation system; 21,140 gpd irrigation of 140 existing lots; 22,424 gpd irrigation of 148 new lots; a 10,000 gpd exfiltration trench; North Dripper System with a disposal capacity of 3,415 gpd; West Dripper system with a disposal capacity of 2,273 gpd; common area irrigation in new construction of 24,931 gpd and Area B Dripper System with a disposal capacity of 6,766 gpd. The total disposal capacity is 151,432 gpd.

See 2002 SARC Order, at p.7.

In that prior rate case the Commission specifically held that “all prudent costs of a reuse project shall be recovered in rates” and that “[t]herefore, the reclaimed water system is 100% used and useful.” 2002 SARC Order at p.11. The Commission specifically allowed recovery of rates based on costs that included the cost of the reclaimed system as described above. 2002 SARC Order at pp. 26-36. The Commission specifically recognized that the reuse system was designed to and would extend to an additional 148 customers upon build-out. 2002 SARC Order at p. 27. The Commission even considered the reuse rate structure in detail and designed the rate structure “to encourage customers to take reuse and assure adequate effluent disposal . . . that is significantly cheaper than potable water and provides an excellent source for irrigation.” 2002 SARC Order at p. 30. Hence, the Commission already has determined that installation of the reclaimed system was necessary and prudent and the current effort to revisit this issue is barred.

Sincerely,



Margaret Ray Kemper

MRK:amb  
Enclosures

RM:7553807:6

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1258	Palm Valley Utility	70236	8/27/2004	WATER IRRIGATION SYSTE	10,500.00		10,500.00
Payor: Hometown America, LLC Payee: LAWN ENFORCEMENT OF CENTRAL FL 1230191				Date	Check No.	Check Amount	
				9/9/2004	80029	\$****10,500.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 9/9/2004      Check No.: 00080029      Check Amount: \$\*\*\*\*10,500.00

TEN THOUSAND FIVE HUNDRED AND 00/100\*\*\*\*\*

Pay to the order of:

LAWN ENFORCEMENT OF CENTRAL FL, INC.  
 7305 GARDNER ST.  
 WINTER PARK FL 32792

\_\_\_\_\_

\_\_\_\_\_



Lawn Enforcement

PO BOX 5873

WINTER PARK FL 32793-5873

PAEM VALLEY  
OVIDO, FL.

70236

(407)657-2001

INVOICE DATE: 8-27-04	DESCRIPTION: RECLAIMED IRRIGATION	CHARGES:
SERVICE FOR THE MONTH OF: AUGUST		
SERVICES RENDERED: MATERIAL ADVANCE ON RECLAIMED WATER IRRIGATION SYSTEM FOR 25 HOMES.		
	TOTAL COST	17,500
	ADVANCE	7,000
8-27-04		
BU# 1238-04-U		
Robert Moore		
THANK YOU, Rick Sirey	DATE DUE: UPON RECEIPT	TOTAL DUE: 10,500

POSTED

A 1% PER MONTH INTEREST WILL BE CHARGED ON ANY ACCOUNT OVER 30 DAYS.

CP Limited Partnership

Date Received by A/P \_\_\_\_\_

Ven # 1230191 Dev 1238

Acct # 1132 \$ 10,500

Acct # - \$ \_\_\_\_\_

Acct # - \$ \_\_\_\_\_

Desc \_\_\_\_\_

CRF # \_\_\_\_\_

Community Approval \_\_\_\_\_ Date \_\_\_\_\_

Region Approval DC/W-y Date 8/30/04

Date Processed \_\_\_\_\_

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number: Palm Valley Utility #1238  
Is the project budgeted?: Yes  No  Budgeted Amount \$: 30,000  
General Ledger Account #: 1132  
Project Number From Budget: 1238-04-05  
Preferred Vendor Name: Lawn Enforcement  
Street Address: 7305 Gardner St.  
City, State and Zip: Winter Park, FL 32792  
Phone and Fax: 407-657-2001  
Description of Activity or Item: Irrigation

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 35,200.  
1. Lawn Enforcement  
2. \_\_\_\_\_  
3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: \_\_\_\_\_

Regional Manager Signature (for Family): DC 5/16/04

Division Vice Pres. Signature and Date: \_\_\_\_\_

Group President Signature and Date\*: C.M. Harris 5/16/04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached  
 Project Approval Only - Work is not Done

Purchase Order Number \_\_\_\_\_  
If this is an unbudgeted capex AWB 09/07/04

Forms to submit to receive Purchase Order:  
(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).  
\_\_\_\_ Copy of Vendor's License  
\_\_\_\_ Copy of Vendor's Proof of insurance with Additional Insured Information  
\_\_\_\_ Copy of Proof of Vendor's Workers Compensation Insurance  
\_\_\_\_ Copies of all Permits Required to Complete Work (Check here if none required \_\_\_\_\_)  
\_\_\_\_ Other Forms or Attachments  
OR:  
1<sup>st</sup> Vendor ID# 1230191  
2<sup>nd</sup> Vendor ID# \_\_\_\_\_  
3<sup>rd</sup> Vendor ID# \_\_\_\_\_  
4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:  
(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)  
\_\_\_\_ Signed and Notarized Lien Waiver (notarized if required by state law)  
\_\_\_\_ Lien waiver not required  
\_\_\_\_ Original Invoice with completed Hometown payment stamps (include PO No. on invoice)  
\_\_\_\_ Approved Change Order(s), if applicable



# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number: Palm Valley # 1238

Is the project budgeted?: Yes  No

General Ledger Account #: 1132

Project Number From Budget: 1238-04-05

Preferred Vendor Name: Iron Enforcement

Street Address: 7305 Gardens St.

City, State and Zip: Winters Park, FL 32794

Phone and Fax: \_\_\_\_\_

Description of Activity or Item: Install reclaim water lines

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 17,500.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: [Signature] 10/5/04

Regional Manager Signature (for Family): [Signature] 7/13/04

Division Vice Pres. Signature and Date: [Signature] 10/5/04

Group President Signature and Date\*: [Signature] 7/14/04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached

Project Approval Only - Work is not Done

Purchase Order Number 1238-04-05

If this is an unbudgeted capex AB 10/07/04

### Forms to submit to receive Purchase Order:

(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

- Copy of Vendor's License
- Copy of Vendor's Proof of Insurance with Additional Insured Information
- Copy of Proof of Vendor's Workers Compensation Insurance
- Copies of all Permits Required to Complete Work (Check here if none required )
- Other Forms or Attachments

OR:

1<sup>st</sup> Vendor ID# 1230191

2<sup>nd</sup> Vendor ID# \_\_\_\_\_

3<sup>rd</sup> Vendor ID# \_\_\_\_\_

4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

- Signed and Notarized Lien Waiver (notarized if required by state law)
- Lien waiver not required
- Original Invoice with completed Hometown payment stamps (include PO No. on invoice)
- Approved Change Order(s), if applicable

LT	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	70257	8/4/2004	GATE & PLUG VALVES	7,800.00		7,800.00
Payor: Hometown America, LLC Payee: LAWN ENFORCEMENT OF CENTRAL FL 1230191				Date	Check No.	Check Amount	
				9/1/2004	77805	\$*****7,800.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 9/1/2004      Check No.: 00077805      Check Amount: \$\*\*\*\*\*7,800.00

SEVEN THOUSAND EIGHT HUNDRED AND 00/100\*\*\*\*\*

Pay to the order of:

LAWN ENFORCEMENT OF CENTRAL FL, INC.  
 7305 GARDNER ST.  
 WINTER PARK FL 32792

\_\_\_\_\_  
 \_\_\_\_\_



Lawn Enforcement  
 PO BOX 5873  
 WINTER PARK FL 32793-5873

PALM VALLEY  
 OUIDO FL

70257

(407)657-2001

INVOICE DATE 8-4-04 DESCRIPTION: IRRIGATION CHARGES:

SERVICE FOR THE MONTH OF: AUGUST

SERVICES RENDERED: NEW 4" RECLAIMED WATER

LINE AS PER PRO POSAL

CP Limited Partnership  
 Date Received by A/P

Cap X project # 1238-04-01

Ven # 1230191 Dev 1238

8/5/04  
Ralph Munro

Acct # 1132 \$ 7,800.

Acct # - \$ -

Acct # - \$ -

Desc 1238-04-01

CRP: \_\_\_\_\_ Date \_\_\_\_\_  
 URA: \_\_\_\_\_ Approval \_\_\_\_\_

THANK YOU,

R. Selby

DATE DUE 8/19/04 TOTAL DUE 7,800.00

A 1% PER MONTH INTEREST WILL BE CHARGED ON ANY ACCOUNT OVER 30 DAYS.

P. 05  
P. 01

FAX NO. 11  
FAX NO. 11

AUG-24-04 TUE 09:51 AM  
JUL-14-04 WED 02:40 PM  
HOMETOWN AMERICA  
HOMETOWN AMERICA

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number: Palm Valley Utility #1238

Is the project budgeted?: Yes  No  Amount \$: 7,000

General Ledger Account #: 1132

Project Number From Budget: 1238-04-01

Preferred Vendor Name: Law Enforcement

Street Address: 7305 Gardner St.

City, State and Zip: Winter Park, FL 32792

Phone and Fax: \_\_\_\_\_

Description of Activity or Item: Gate & plug valves

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 7,800.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: \_\_\_\_\_

Regional Manager Signature (for Family): DC 7/6/04

Division Vice Pres. Signature and Date: \_\_\_\_\_

Group President Signature and Date: A.M. Mani 8/23/04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached  
 Project Approval Only - Work is not Done

Purchase Order Number 1238-04-01  
If this is an unbudgeted capex Yes

Forms to submit to receive Purchase Order:  
(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

- Copy of Vendor's License
- Copy of Vendor's Proof of Insurance with Additional Insured Information
- Copy of Proof of Vendor's Workers Compensation Insurance
- Copies of all Permits Required to Complete Work (Check here if none required \_\_\_\_\_)
- Other Forms or Attachments

OR:  
1<sup>st</sup> Vendor ID# 1230191  
2<sup>nd</sup> Vendor ID# \_\_\_\_\_  
3<sup>rd</sup> Vendor ID# \_\_\_\_\_  
4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

- Signed and Notarized Lien Waiver (notarized if required by state law)
- Lien waiver not required
- Original Invoice with completed Hometown payment stamps (include PO No. on invoice)
- Approved Change Order(s), if applicable

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	70256	8/4/2004	IRRIGATION SYSTEM	18,200.00		18,200.00
Payor: Hometown America, LLC Payee: LAWN ENFORCEMENT OF CENTRAL FL 1230191				Date: 8/24/2004	Check No: 77387	Check Amount: \$****18,200.00	

**Hometown America, LLC**  
150 N. Wacker Drive, Ste 2800  
Chicago, IL 60606-4102

Bank Of America  
Chicago, IL 60634

2-3  
710 IL

**COPY**


Date: 8/24/2004      Check No: 00077387      Check Amount: \$\*\*\*\*18,200.00

EIGHTEEN THOUSAND TWO HUNDRED AND 00/100\*\*\*\*\*

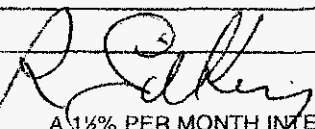
Pay to the order of:

LAWN ENFORCEMENT OF CENTRAL FL, INC.  
7305 GARDNER ST.  
WINTER PARK FL 32792

\_\_\_\_\_  
\_\_\_\_\_

 **Lawn Enforcement** PALM VALLEY  
PO BOX 5873  
WINTER PARK FL 32793-5873 OUIDSO, FL.

70256  
(407)657-2001

INVOICE DATE: 8-4-04	DESCRIPTION: IRRIGATION	CHARGES:
SERVICE FOR THE MONTH OF: AUGUST		
SERVICES RENDERED: IRRIGATION SYSTEM FOR		
EEF-20 - 2 SECTIONS AS PER PROPOSAL,		\$ 25,200
MINUS FIRST DRAW		7,000
FINAL DRAW CAPX # 1238-04-05		
8.5.04		
Robert Munro		BALANCE \$ 18,200
THANK YOU, 	UPON	
	DATE DUE: RECEIPT	TOTAL DUE: \$ 18,200

A 1 1/2% PER MONTH INTEREST WILL BE CHARGED ON ANY ACCOUNT OVER 30 DAYS.

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number:

Palm Valley Utility #1238

Is the project budgeted?:

Yes  No  Budgeted Amount \$: 30,000

General Ledger Account #:

1132

Project Number From Budget:

1238-04-05

Preferred Vendor Name:

Lawn Enforcement

Street Address:

7305 Gardner St.

City, State and Zip

Winter Park, FL 32792

Phone and Fax:

407-657-2001

Description of Activity or Item:

Irrigation

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 35,200.

1. Lawn Enforcement 34,200

2. \_\_\_\_\_

3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: \_\_\_\_\_

Regional Manager Signature (for Family):

DC 5/16/04

Division Vice Pres. Signature and Date:

Group President Signature and Date:

A.M. Mann 5/16/04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached

Project Approval Only - Work is not Done

Purchase Order Number 1238 04 05

If this is an unbudgeted capex

8/110

Forms to submit to receive Purchase Order:

(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

- Copy of Vendor's License
- Copy of Vendor's Proof of Insurance with Additional Insured Information
- Copy of Proof of Vendor's Workers Compensation Insurance
- Copies of all Permits Required to Complete Work (Check here if none required )
- Other Forms or Attachments

OR:

- 1<sup>st</sup> Vendor ID# 1230191
- 2<sup>nd</sup> Vendor ID# \_\_\_\_\_
- 3<sup>rd</sup> Vendor ID# \_\_\_\_\_
- 4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

- Signed and Notarized Lien Waiver (notarized if required by state law)
- Lien waiver not required
- Original Invoice with completed Hometown payment stamps (include PO No. on invoice)
- Approved Change Order(s), if applicable

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	70220	7/28/2004	FIRST DRAW IRRIGATION	7,000.00		7,000.00
Payor: Hometown America, LLC Payee: LAWN ENFORCEMENT OF CENTRAL FL 1230191				Date	Check No.	Check Amount	
				8/17/2004	76259	\$*****7,000.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 8/17/2004  
 Check No.: 00076259  
 Check Amount: \$\*\*\*\*\*7,000.00

SEVEN THOUSAND AND 00/100\*\*\*\*\*

Pay to the order of:

LAWN ENFORCEMENT OF CENTRAL FL, INC.  
 7305 GARDNER ST.  
 WINTER PARK FL 32792

\_\_\_\_\_

\_\_\_\_\_



*Lawn Enforcement*  
 PO BOX 5873  
 WINTER PARK FL 32793-5873

*PALM VALLEY*  
*ORL FL*

70220

(407)657-2001

INVOICE DATE: *7-28-04* DESCRIPTION: *FEUSE IRRIGATION* CHARGES:

SERVICE FOR THE MONTH OF:

SERVICES RENDERED: *FIRST DRAW ON \$25,200.00*

*FOR EFF 20 OF \$7,000.00*

*BALANCE OF \$18,200.00 UPON*

*COMPLETION.*

*Copy # 1238-04-05*

*7/29/04 Robert Munro*

THANK YOU, *R. Kelly* DATE DUE: *7-28-04* TOTAL DUE: *\$7,000.00*

A 1% PER MONTH INTEREST WILL BE CHARGED ON ANY ACCOUNT OVER 30 DAYS.

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number:

Palm Valley Utility #1238

Is the project budgeted?:

Yes  No  Budgeted Amount \$: 30,000

General Ledger Account #:

1132

Project Number From Budget:

1238-04-05

Preferred Vendor Name:

Lawn Enforcement

Street Address:

7305 Gardner St.

City, State and Zip

Winter Park, Fl. 32792

Phone and Fax:

407-657-2001

Description of Activity or Item:

Irrigation

List Bidder's Names and Bid Amounts: (Cost of Bid)

~~\$45,200~~  
34,200 - DC

1. Lawn Enforcement

2.

Comments on Bids:

Property Manager Signature and Date:

Regional Manager Signature (for Family):

DC 5/16/04

Division Vice Pres. Signature and Date:

Group President Signature and Date\*:

R.M. Mami 5/16/04

\* V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached  
 Project Approval Only - Work is not Done

Purchase Order Number 1238-04-05  
If this is an unbudgeted capex

DC  
5/13/04

**Forms to submit to receive Purchase Order:**

(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

- Copy of Vendor's License
- Copy of Vendor's Proof of Insurance with Additional Insured Information
- Copy of Proof of Vendor's Workers Compensation Insurance
- Copies of all Permits Required to Complete Work (Check here if none required )
- Other Forms or Attachments

OR:  
1<sup>st</sup> Vendor ID# 1230191  
2<sup>nd</sup> Vendor ID# \_\_\_\_\_  
3<sup>rd</sup> Vendor ID# \_\_\_\_\_  
4<sup>th</sup> Vendor ID# \_\_\_\_\_

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- Signed and Notarized Lien Waiver (notarized if required by state law)
- Lien waiver not required
- Original Invoice with completed Hometown payment stamps (include PO No. on invoice)
- Approved Change Order(s), if applicable



BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	70222	6/16/2004	ABOVE GROUND IRRIGATIO	9,000.00		9,000.00
Payor: Hometown America, LLC Payee: LAWN ENFORCEMENT OF CENTRAL FL 1230191				Date	Check No.	Check Amount	
				6/24/2004	66435	\$*****9,000.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 6/24/2004  
 Check No.: 00066435  
 Check Amount: \$\*\*\*\*\*9,000.00

NINE THOUSAND AND 00/100\*\*\*\*\*

Pay to the order of:

LAWN ENFORCEMENT OF CENTRAL FL, INC.  
 7305 GARDNER ST.  
 WINTER PARK FL 32792



*PALM VALLEY*  
*ORL, FL.*

70222

(407)657-2001

INVOICE DATE: 6-16-04	DESCRIPTION: IRRIGATION	CHARGES:
SERVICE FOR THE MONTH OF: JUNE		
SERVICES RENDERED: AS PER PROPOSAL		
ABOVE GROUND IRRIGATION FOR		
EFF 5, NEW SYSTEM.		\$9,000.00
	6/16/04	
	Robert Munro	
	CAP # 1238-04-05	
	PHASE I of III	
THANK YOU, <i>R. Silky</i>	DATE DUE: UPON RECEIPT	TOTAL DUE:
A 1% PER MONTH INTEREST WILL BE CHARGED ON ANY ACCOUNT OVER 30 DAYS.		

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number: Palm Valley Utilities #1238  
 Is the project budgeted?: Yes  No  Budgeted Amount \$: 30,000  
 General Ledger Account #: 1132  
 Project Number From Budget: 1238-04-05  
 Preferred Vendor Name: Lawn Enforcement  
 Street Address: 7305 Gardner St.  
 City, State and Zip: Winter Park, FL 32792  
 Phone and Fax: 407-657-2001  
 Description of Activity or Item: Irrigation

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 35,200.  
 1. Lawn Enforcement  
 2. \_\_\_\_\_  
 3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: \_\_\_\_\_

Regional Manager Signature (for Family): DC 5/16/04

Division Vice Pres. Signature and Date: \_\_\_\_\_

Group President Signature and Date\*: A.M. Morris 5/16/04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached  
 Project Approval Only - Work is not Done RM 6/21/04  
 Purchase Order Number 1238-04-05  
 If this is an unbudgeted capex

Forms to submit to receive Purchase Order:  
 (Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).  
 Copy of Vendor's License  
 Copy of Vendor's Proof of Insurance with Additional Insured Information  
 Copy of Proof of Vendor's Workers Compensation Insurance  
 Copies of all Permits Required to Complete Work (Check here if none required )  
 Other Forms or Attachments  
 OR:  
 1<sup>st</sup> Vendor ID# 1230191  
 2<sup>nd</sup> Vendor ID# \_\_\_\_\_  
 3<sup>rd</sup> Vendor ID# \_\_\_\_\_  
 4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)  
 Signed and Notarized Lien Waiver (notarized if required by state law)  
 Lien waiver not required  
 Original Invoice with completed Hometown payment stamps (include PO No. on invoice)  
 Approved Change Order(s), if applicable

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	70179	9/24/2004	WATER IRRIGATION	7,000.00		7,000.00
Payor: Hometown America, LLC Payee: LAWN ENFORCEMENT OF CENTRAL FL 1230191				Date 10/12/2004	Check No. 85422	Check Amount \$*****7,000.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

$\frac{2-3}{710 \text{ IL}}$

**COPY**

Date: 10/12/2004  
 Check No: 00085422

Check Amount  
 \$\*\*\*\*\*7,000.00

SEVEN THOUSAND AND 00/100\*\*\*\*\*

Pay to the order of:

LAWN ENFORCEMENT OF CENTRAL FL, INC.  
 7305 GARDNER ST.  
 WINTER PARK FL 32792



70179

(407)657-2001

INVOICE DATE: 9-24-04	DESCRIPTION: PALM VALLEY	CHARGES:
SERVICE FOR THE MONTH OF: Sept. / Oct.		
SERVICES RENDERED: IRRIGATION, RECLAIMED		
SEE PROPOSAL DATED 7-1-04		
TOTAL JOB COST		17,500.00
ADVANCE PAID 9/9/04 CK# 80029		10,500.00
THANK YOU,		DATE DUE: 10/17/04
		TOTAL DUE: 7,000.00

A 1% PER MONTH INTEREST WILL BE CHARGED ON ANY ACCOUNT OVER 30 DAYS.



# LAWN ENFORCEMENT

LANDSCAPING AND MAINTENANCE 7305 Gardner St. • P.O. Box 5873 Winter Park, FL 32792  
(407) 657-2001

TO: Robert Nunno  
SUBJECT: Palm Valley 17,500.00

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1230	Palm Valley Utility	70236	8/27/2004	WATER IRRIGATION SYSTE	10,500.00		10,500.00
<i>Received</i>				<i>9/13/04</i>			
Payor: <b>Maintenance America, LLC</b> Payee: <b>LAWN ENFORCEMENT OF CENTRAL FL</b>				Date: <b>8/9/2004</b>	Check No.: <b>80029</b>	Check Amount: <b>\$***10,500.00</b>	

*will consider this an advance  
for invoice 70236 17,500  
- 10,500  
= 7,000.00 balance*

SIGNED: *[Signature]* DATE: *9/13/04*

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number: Palm Valley # 1238

Is the project budgeted?: Yes  No  Budgeted Amount \$: \_\_\_\_\_

General Ledger Account #: 1132

Project Number From Budget: 1238-04-05

Preferred Vendor Name: Spinn Enforcement

Street Address: 7305 Gardens St.

City, State and Zip: Winter Park, FL 32792

Phone and Fax: \_\_\_\_\_

Description of Activity or Item: Install reclaim water lines

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 17,500.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: [Signature] 10/5/04

Regional Manager Signature (for Family): [Signature] 7/13/04

Division Vice Pres. Signature and Date: [Signature] 10/5/04

Group President Signature and Date\*: [Signature] 7/14/04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached

Project Approval Only - Work is not Done

Purchase Order Number 1238-04-05

If this is an unbudgeted capex AB 10/07/04

Forms to submit to receive Purchase Order:

(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

Copy of Vendor's License

Copy of Vendor's Proof of Insurance with Additional Insured Information

Copy of Proof of Vendor's Workers Compensation Insurance

Copies of all Permits Required to Complete Work (Check here if none required )

Other Forms or Attachments

OR:

1<sup>st</sup> Vendor ID# 1230191

2<sup>nd</sup> Vendor ID# \_\_\_\_\_

3<sup>rd</sup> Vendor ID# \_\_\_\_\_

4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

Signed and Notarized Lien Waiver (notarized if required by state law)

Lien waiver not required

Original Invoice with completed Hometown payment stamps (include PO No. on invoice)

Approved Change Order(s), if applicable

## View Today's Stop Payment Confirmations

• [View Stop Payment Confirmation History](#)

Stop payment confirmations last updated at: 04/23/2004 at 16:30:22 CDT

Account:

<b>Account:</b> 8666100299	<b>Expire Date:</b> 04/02/2004	<b>Type:</b> Stop Place
<b>Check #:</b> 0000046683	<b>Effective Date:</b> 04/23/2004	<b>Bank Status:</b> Rejected
<b>Amount:</b> 1,200.00	<b>Request User:</b> CC024511	<b>Reason:</b>
<b>Payee:</b> Lawn Enforcement of Central		<b>Activity Status:</b> Confirmed
<b>Memo:</b>		
<b>Alert:</b> Stop Place Rejected. Stop Payment found for account, amount, and check #.		
<b>Account:</b> 8666100299	<b>Expire Date:</b> 10/25/2004	<b>Type:</b> Stop Place
<b>Check #:</b> 0000046512	<b>Effective Date:</b> 04/23/2004	<b>Bank Status:</b> Accepted
<b>Amount:</b> 367.28	<b>Request User:</b> CC024511	<b>Reason:</b>
<b>Payee:</b> Acorn Safe & Lock		<b>Activity Status:</b> Confirmed
<b>Memo:</b>		
<b>Account:</b> 8666100299	<b>Expire Date:</b> 10/25/2004	<b>Type:</b> Stop Place
<b>Check #:</b> 0000042611	<b>Effective Date:</b> 04/23/2004	<b>Bank Status:</b> Accepted
<b>Amount:</b> 377.56	<b>Request User:</b> CC024511	<b>Reason:</b>
<b>Payee:</b> Dickinson, Jason		<b>Activity Status:</b> Confirmed
<b>Memo:</b>		

123 0151

File Edit View Options Help Links Paym SLE Internet

Document No: Two 46683 46683 46683 Hometown America LLC Payment 46683

Payment Type	Payment Number	Payment Date	Payee	Payment Amount	Discount Taken	Post Code
PI	46683	3/9/2004	LAWN ENFORCEMENT OF CENTRAL	1,200.00-		D

Row 1

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
123B	Palm Valley Utility	100404-145	10/4/2004	HURRICANE-FURNISH & IN	30,000.00		30,000.00
Payor: <b>Hometown America, LLC</b> Payee: <b>WAYNE'S DIVERSIFIED SERVICES</b> 24601				Date	Check No.	Check Amount	
				11/1/2004	88754	\$****30,000.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 11/1/2004  
 Check No.: 00088754  
 Check Amount: \$\*\*\*\*30,000.00

THIRTY THOUSAND AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_

\_\_\_\_\_





# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
Deltona, FL 32728  
(407) 330-7597

Inv. #100404-145

Billed to: <u>Palm Valley</u>	Invoice Date: <u>Oct. 04, 2004</u>																				
	Project Name: <u>Sewer plant</u>																				
	Location: <u>Oviedo, Fl.</u>																				
<del>XXXXXXXXXX</del>	Date of Service:																				
Furnish and install new Lamson centrifical blower and control panel																					
	\$30,000.00																				
<table border="1"><tr><td>BU # <u>1238</u></td><td>Supplier # <u>24601</u></td></tr><tr><td>CapEx PO # _____</td><td></td></tr><tr><td>Invoice # <u>100404-145</u></td><td></td></tr><tr><td>GL Acct. # <u>8600.105</u></td><td>Description _____ Amt <u>30,000.</u></td></tr><tr><td>_____</td><td>_____</td></tr><tr><td>_____</td><td>_____</td></tr><tr><td>_____</td><td>_____</td></tr><tr><td>_____</td><td>Total _____</td></tr><tr><td>Manager Approval _____</td><td>Date _____</td></tr><tr><td>Additional Approval <u>RP/y</u></td><td>Date <u>10/21/04</u></td></tr></table>		BU # <u>1238</u>	Supplier # <u>24601</u>	CapEx PO # _____		Invoice # <u>100404-145</u>		GL Acct. # <u>8600.105</u>	Description _____ Amt <u>30,000.</u>	_____	_____	_____	_____	_____	_____	_____	Total _____	Manager Approval _____	Date _____	Additional Approval <u>RP/y</u>	Date <u>10/21/04</u>
BU # <u>1238</u>	Supplier # <u>24601</u>																				
CapEx PO # _____																					
Invoice # <u>100404-145</u>																					
GL Acct. # <u>8600.105</u>	Description _____ Amt <u>30,000.</u>																				
_____	_____																				
_____	_____																				
_____	_____																				
_____	Total _____																				
Manager Approval _____	Date _____																				
Additional Approval <u>RP/y</u>	Date <u>10/21/04</u>																				
<p><u>BU # 1238</u> <u>10/6/04</u> <u>Robert</u></p>																					
TOTAL DUE THIS INVOICE																					
	\$30,000.00																				

THANK YOU FOR YOUR BUSINESS

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	102004-150	10/20/2004	HURRICANE-SEWER PLANT	1,123.00		1,123.00
Payor: Hometown America, LLC Payee: WAYNE'S DIVERSIFIED SERVICES 24601				Date 11/1/2004	Check No. 88757	Check Amount \$*****1,123.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 11/1/2004  
 Check No.: 00088757  
 Check Amount: \$\*\*\*\*\*1,123.00

ONE THOUSAND ONE HUNDRED TWENTY THREE AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_  
 \_\_\_\_\_



BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	071104-104	7/11/2004	SEWER REPAIR	250.00		250.00
Payor: <b>Hometown America, LLC</b> Payee: <b>WAYNE'S DIVERSIFIED SERVICES</b> 24601				Date 8/1/2004	Check No. 73125	Check Amount \$*****250.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

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 710 IL

**COPY**

Date: 8/1/2004      Check No.: 00073125      Check Amount: \$\*\*\*\*\*250.00

TWO HUNDRED FIFTY AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_

\_\_\_\_\_

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
Deltona, FL 32728  
(407) 330-7597

Inv. #071104-104

Billed to: Palm Valley	Invoice Date: July 11, 2004
	Project Name: Sewer plant
	Location: Oviedo, FL
	Date of Service: July 9, 2004

Perform PM on 2 Sutterbilt blowers  
new belts, intake filters, grease and oil change

\$250.00

**POSTED**

BU # 1238  
Robert Munro  
7/14/04

Sewer wwTP  
repairs

CP Limited Partnership  
Date Received by A/P \_\_\_\_\_

Ven # 24601 Dev 1238

Acct # 7400.1900 \$ 250.

Acct # \_\_\_\_\_ \$ \_\_\_\_\_

Acct # \_\_\_\_\_ \$ \_\_\_\_\_

Desc \_\_\_\_\_

CRF # \_\_\_\_\_

Community Approval \_\_\_\_\_

Request Approval AC/vj

Date processed \_\_\_\_\_

Date 7/23/04

\$250.00

**TOTAL DUE THIS INVOICE**

**THANK YOU FOR YOUR BUSINESS**

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	083004-122	8/30/2004	CHARLEY-RPLC COMPRESSO	8,068.00		8,068.00
Payor: <b>Hometown America, LLC</b> Payee: <b>WAYNE'S DIVERSIFIED SERVICES</b> 24601				Date 9/17/2004	Check No. 81661	Check Amount \$*****8,068.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 9/17/2004      Check No.: 00081661      Check Amount: \$\*\*\*\*\*8,068.00

EIGHT THOUSAND SIXTY EIGHT AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_

\_\_\_\_\_

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
Deltona, FL 32728  
(407) 330-7597

Inv. #083004-122

Billed to: <u>Palm ValleyMHP</u>	Invoice Date: <u>Aug. 30, 2004</u>
	Project Name: <u>[REDACTED]</u>
	Location: <u>Oviedo, FL</u>
	Date of Service:
Replace Whitewater compressor on pressure vessel replace breaker for Panel K repair air piping repair 6" water line in area 8	\$1550.00 330.00 1430.00 4758.00
<b>CP Limited Partnership</b> Date Received by A/P _____ Ven # <u>24601</u> Dev <u>1238</u> Acct # <u>8600.106</u> \$ <u>8068</u> Acct # _____ \$ _____ Acct # _____ \$ _____ Desc _____ CRF# _____ Community Approval _____ Date _____ Regional Approval <u>DC/VJ</u> Date <u>9/16/04</u> Date Processed _____	
<u>BU# 8600.106 (1238)</u> <u>9/11/04</u> <u>Robert Munro</u>	
<b>TOTAL DUE THIS INVOICE</b>	<b>\$8068.00</b>

THANK YOU FOR YOUR BUSINESS



BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1236	Palm Valley Utility	062104-085	6/21/2004	WATER TANK ADJUSTMENT	250.00		250.00
Payor: Hometown America, LLC Payee: WAYNE'S DIVERSIFIED SERVICES 24601				Date	Check No.	Check Amount	
				7/6/2004	68613	\$*****250.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 7/6/2004      Check No.: 00068613      Check Amount: \$\*\*\*\*\*250.00

TWO HUNDRED FIFTY AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_  
 \_\_\_\_\_



# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #062104-085

Billed to: Palm Valley	Invoice Date: June 21, 2004
	Project Name: Water plant
	Location: Oviedo, FL
	Date of Service:
Respond to operators emergency call of hydro tank water log and PRV spraying all over. Found PRV need slight adjustment. All OK	
	\$250.00
CP Limited Partnership Date Received by A/P _____ Ven # <u>24601</u> Dev <u>1238</u> Acct # <u>7400-2000</u> \$ <u>250.</u> Acct # _____ \$ _____ Acct # _____ \$ _____ Desc _____ CRF # _____ Community Approval _____ Date _____ Regional Approval <u>OC/vy</u> Date <u>6/25/04</u> Date Processed _____	
BU # 1238 Robert Munro 6/23/04	
TOTAL DUE THIS INVOICE	\$250.00

POSTED

THANK YOU FOR YOUR BUSINESS

*BU Utility  
 sense  
 m*

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	081204-083	6/12/2004	INSTALL BLOWER ON SURG	1,630.00		1,630.00
Payor: Hometown America, LLC Payee: WAYNE'S DIVERSIFIED SERVICES 24601				Date	Check No.	Check Amount	
				7/13/2004	69793	\$*****1,630.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 7/13/2004  
 Check No.: 00069793  
 Check Amount: \$\*\*\*\*\*1,630.00

ONE THOUSAND SIX HUNDRED THIRTY AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_

\_\_\_\_\_

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #061204-083

Billed to: <b>Palm Valley</b>	Invoice Date: <b>June 12, 2004</b>
	Project Name: <b>Sewer plant</b>
	Location: <b>Oviedo, FL</b>
	Date of Service:

Install new blower on surge tank

\$1630.00

**CP Limited Partnership**

Date Received by A/P \_\_\_\_\_

Ven # 24601 Dev 1238

Acct # 1132 \$ 1630.

Acct # - \$ \_\_\_\_\_

Acct # - \$ \_\_\_\_\_

Desc 1238-04-U

CRF # \_\_\_\_\_

Community Approval \_\_\_\_\_ Date \_\_\_\_\_

Regional Approval DCJ Date 6/28/04

Date Processed \_\_\_\_\_



6/23/04  
 BU #1238  
 Robert Munro

**TOTAL DUE THIS INVOICE**

**\$1630.00**

**THANK YOU FOR YOUR BUSINESS**

1238-04-05  
 CAP X

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number:

Palm Valley #1238

Is the project budgeted?:

Yes  No  Budgeted Amount \$: \_\_\_\_\_

General Ledger Account #:

~~1165~~ 1165

Project Number From Budget:

1238-04-U

Preferred Vendor Name:

Waynes Diversified

Street Address:

PO Box 5477

City, State and Zip

Deltona, FL. 32728

Phone and Fax:

Description of Activity or Item:

New Compressors on hydro tank  
& new blower on surge tank

List Bidder's Names and Bid Amounts: (Cost of Bid) \$

- 1. 2175.00
- 2. 1630.00
- 3. #3,805.00

Comments on Bids:

Property Manager Signature and Date:

Regional Manager Signature (for Family):

DC 7/2/04

Division Vice Pres. Signature and Date:

Group President Signature and Date\*:

r.m. #fan 7-2-04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached  
 Project Approval Only - Work is not Done

Purchase Order Number 1238-04-51  
If this is an unbudgeted capex END  
7/7/04

Forms to submit to receive Purchase Order:  
(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).  
 Copy of Vendor's License  
 Copy of Vendor's Proof of Insurance with Additional Insured Information  
 Copy of Proof of Vendor's Workers Compensation Insurance  
 Copies of all Permits Required to Complete Work (Check here if none required )  
 Other Forms or Attachments  
OR:  
1<sup>st</sup> Vendor ID# 24601  
2<sup>nd</sup> Vendor ID# \_\_\_\_\_  
3<sup>rd</sup> Vendor ID# \_\_\_\_\_  
4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)  
 Signed and Notarized Lien Waiver (notarized if required by state law)  
 Lien waiver not required  
 Original Invoice with completed Hometown payment stamps (include PO No. on invoice)  
 Approved Change Order(s), if applicable

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	061204-082	6/12/2004	INSTALL WHITEWATER COM	2,175.00		2,175.00
Payor: Hometown America, LLC Payee: WAYNE'S DIVERSIFIED SERVICES 24601				Date 7/13/2004	Check No. 69794	Check Amount \$*****2,175.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 7/13/2004  
 Check No.: 00069794  
 Check Amount: \$\*\*\*\*\*2,175.00

TWO THOUSAND ONE HUNDRED SEVENTY FIVE AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_

\_\_\_\_\_

# WAYNE'S DIVERSIFIED SERVICES.

P.O. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #061204-082

Billed to: <u>Palm Valley</u>	Invoice Date: <u>June 12, 2004</u>
	Project Name: <u>Water plant</u>
	Location: <u>Oviedo, FL</u>
	Date of Service:
Installed new Whitewater compressor on hydro tank Cleaned both aeration towers	\$1325.00 850.00
<p>CP Limited Partnership                  Date Received by A/P _____                  Ven # <u>24601</u> Dev <u>1238</u>                  Acct # <u>1132</u> \$ <u>2175.</u>                  Acct # <u>-</u> \$ _____                  Acct # <u>-</u> \$ _____                  Desc <u>1238-04-U</u>                  CRF # _____                  Community Approval _____ Date _____                  Financial Approval <u>[Signature]</u> Date <u>6/24/04</u></p> <p><b>POSTED</b></p> <p><u>BU# 1238</u>  <u>6/23/04</u>  <u>DORA</u>                  These were both                  compliance issues  <u>Robert Munro</u></p>	
TOTAL DUE THIS INVOICE	
	\$2175.00

THANK YOU FOR YOUR BUSINESS

1238-04-05 CAFX

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number: Palm Valley #1238

Is the project budgeted?: Yes  No  Budgeted Amount \$: \_\_\_\_\_

General Ledger Account #: ~~1165~~ 1165

Project Number From Budget: 1238-04-U

Preferred Vendor Name: Waynes Diversified

Street Address: PO Box 5477

City, State and Zip: Deltona, FL 32728

Phone and Fax: \_\_\_\_\_

Description of Activity or Item: New Compressor or hydro tank  
& new blower on surge tank

List Bidder's Names and Bid Amounts: (Cost of Bid) \$

1.	<u>2175.</u>
2.	<u>1630.</u>
3.	<u>\$3,805.</u>

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: \_\_\_\_\_

Regional Manager Signature (for Family): [Signature] 7/2/04

Division Vice Pres. Signature and Date: \_\_\_\_\_

Group President Signature and Date\*: [Signature] 7-2-04

Pay from Original Invoices Attached

Project Approval Only -- Work is not Done

Purchase Order Number 1238-04-51

If this is an unbudgeted capex END

Forms to submit to receive Purchase Order:

(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

Copy of Vendor's License

Copy of Vendor's Proof of Insurance with Additional Insured Information

Copy of Proof of Vendor's Workers Compensation Insurance

Copies of all Permits Required to Complete Work (Check here if none required )

Other Forms or Attachments

OR:

1<sup>st</sup> Vendor ID# 24601

2<sup>nd</sup> Vendor ID# \_\_\_\_\_

3<sup>rd</sup> Vendor ID# \_\_\_\_\_

4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

Signed and Notarized Lien Waiver (notarized if required by state law)

Lien waiver not required

Original Invoice with completed Hometown payment stamps (include PO No. on invoice)

Approved Change Order(s), if applicable

\*V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	112004-164	11/20/2004	REPLACE 2 BLOWER/MOTOR	20,200.00		20,200.00
Payor: Hometown America, LLC Payee: WAYNE'S DIVERSIFIED SERVICES 24601				Date	Check No.	Check Amount	
				12/14/2004	95854	\$****20,200.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 12/14/2004      Check No.: 00095854      Check Amount: \$\*\*\*\*20,200.00

TWENTY THOUSAND TWO HUNDRED AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_  
 \_\_\_\_\_



# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #112004-164

Billed to: Palm Valley	Invoice Date: Nov. 20, 2004																				
	Project Name: Sewer plant																				
	Location: Oviedo, FL.																				
	Date of Service:																				
Replace #2 blower/motor	\$20200.00																				
<table border="1" style="width: 100%;"> <tr> <td>BU # 1238</td> <td>Supplier # 24601</td> </tr> <tr> <td>CapEx PO # 1238-04-01</td> <td></td> </tr> <tr> <td>Invoice # 112004-164</td> <td></td> </tr> <tr> <td>Gl. Acct. # 1132</td> <td>Description</td> </tr> <tr> <td></td> <td>Art 20,200.</td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td>Total</td> </tr> <tr> <td>Manager Approval</td> <td>Date</td> </tr> <tr> <td>Additional Approval <i>RC/VJ</i></td> <td>Date 11/29/04</td> </tr> </table>		BU # 1238	Supplier # 24601	CapEx PO # 1238-04-01		Invoice # 112004-164		Gl. Acct. # 1132	Description		Art 20,200.						Total	Manager Approval	Date	Additional Approval <i>RC/VJ</i>	Date 11/29/04
BU # 1238	Supplier # 24601																				
CapEx PO # 1238-04-01																					
Invoice # 112004-164																					
Gl. Acct. # 1132	Description																				
	Art 20,200.																				
	Total																				
Manager Approval	Date																				
Additional Approval <i>RC/VJ</i>	Date 11/29/04																				
<p>BU # 1238                  11/23/04                  Robert Munro                  Send Check to                  Robert Munro</p>																					
TOTAL DUE THIS INVOICE	\$20200.00																				

POSTED

THANK YOU FOR YOUR BUSINESS

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number:

Palm Valley # 1238

Is the project budgeted?:

Yes  No  Budgeted Amount \$: \_\_\_\_\_

General Ledger Account #:

1132

Project Number From Budget:

1238-04-11

Preferred Vendor Name:

Wayne's Services

Street Address:

P.O. Box 5177

City, State and Zip

Deerbon, FL 32228

Phone and Fax:

Description of Activity or Item:

Blower motor/mandate

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 20,200.

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date:



Regional Manager Signature (for Family):

Division Vice Pres. Signature and Date:

Group President Signature and Date\*:

[Signature] 12/6/04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

- Pay from Original Invoices Attached
- Project Approval Only - Work is not Done

Purchase Order Number 1238-04-54  
If this is an unbudgeted capex NB 12/10/04

### Forms to submit to receive Purchase Order:

(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

- Copy of Vendor's License
- Copy of Vendor's Proof of Insurance with Additional Insured Information
- Copy of Proof of Vendor's Workers Compensation Insurance
- Copies of all Permits Required to Complete Work (Check here if none required )
- Other Forms or Attachments

OR:

- 1<sup>st</sup> Vendor ID# 24601
- 2<sup>nd</sup> Vendor ID# \_\_\_\_\_
- 3<sup>rd</sup> Vendor ID# \_\_\_\_\_
- 4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

- Signed and Notarized Lien Waiver (notarized if required by state law)
- Lien waiver not required
- Original Invoice with completed Hometown payment stamps (include PO No. on invoice)
- Approved Change Order(s), if applicable

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	100404-146	10/4/2004	INSTALL WELL METER	57,000.00		57,000.00
Payor: <b>Hometown America, LLC</b> Payee: <b>WAYNE'S DIVERSIFIED SERVICES</b> 24601				Date	Check No.	Check Amount	
				11/9/2004	90165	\$****57,000.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 11/9/2004      Check No.: 00090165      Check Amount: \$\*\*\*\*57,000.00

FIFTY SEVEN THOUSAND AND 00/100\*\*\*\*\*

Pay to the order of:

**WAYNE'S DIVERSIFIED SERVICES**  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_  
 \_\_\_\_\_

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
Deltona, FL 32728  
(407) 330-7597

Inv. #100404-146

Billed to: Palm Valley	Invoice Date: Oct. 04, 2004
	Project Name: Water meters
	Location: Oviedo, Fl.
	Date of Service:

Furnish and install well meters as directed by engineer each well.

\$57,000.00

BU # <u>1238</u>	Supplier # <u>24601</u>	
CapEx PD # <u>1238-04-U</u>		
Invoice # <u>100404-146</u>		
GL Acct. # <u>1132</u>	Description	Amt
		<u>57,000.</u>
	Total	
Manager Approval	Date	
Additional Approval <u>[Signature]</u>	Date <u>10/29/04</u>	

POSTED

BU# 1238  
10/6/04  
Robert Munro

TOTAL DUE THIS INVOICE

\$57,000.00

THANK YOU FOR YOUR BUSINESS

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number: Palm Valley #1238

Is the project budgeted?: Yes  No  Budgeted Amount \$: \_\_\_\_\_

General Ledger Account #: 1132

Project Number From Budget: 1238-04-U

Preferred Vendor Name: Waynes Diversified

Street Address: P.O. Box 5177

City, State and Zip: Deltona, FL 32728

Phone and Fax: \_\_\_\_\_

Description of Activity or Item: Mandate

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 57,000.-

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: \_\_\_\_\_

Regional Manager Signature (for Family): \_\_\_\_\_

Division Vice Pres. Signature and Date: DC [Signature] 10/29/04

Group President Signature and Date\*: [Signature] 10/29/04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached  
 Project Approval Only - Work is not Done

Purchase Order Number 1238-04-U  
 If this is an unbudgeted capex 12380452

Forms to submit to receive Purchase Order: HB 10/5/04  
 (Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

Copy of Vendor's License  
 Copy of Vendor's Proof of Insurance with Additional Insured Information  
 Copy of Proof of Vendor's Workers Compensation Insurance  
 Copies of all Permits Required to Complete Work (Check here if none required )  
 Other Forms or Attachments

OR:  
 1<sup>st</sup> Vendor ID# 24601  
 2<sup>nd</sup> Vendor ID# \_\_\_\_\_  
 3<sup>rd</sup> Vendor ID# \_\_\_\_\_  
 4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

Signed and Notarized Lien Waiver (notarized if required by state law)  
 Lien waiver not required  
 Original Invoice with completed Hometown payment stamps (include PO No. on invoice)  
 Approved Change Order(s), if applicable

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	100404140	10/4/2004	EFFLUENT POND	207,500.00		207,500.00
Payor: <b>Hometown America, LLC</b> Payee: <b>WAYNE'S DIVERSIFIED SERVICES</b>				Date 10/19/2004	Check No. 86521	Check Amount \$***207,500.00	

24601

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 10/19/2004      Check No.: 00086521      Check Amount: \$\*\*\*207,500.00

TWO HUNDRED SEVEN THOUSAND FIVE HUNDRED AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_  
 \_\_\_\_\_

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #100404-140

Billed to: <b>Palm Valley</b>	Invoice Date: <b>Oct. 04, 2004</b>																														
	Project Name: <b>Effluent pond</b>																														
	Location: <b>Oviedo, FL.</b>																														
	Date of Service:																														
Construct new lined effluent pond as directed by engineers drawings (phase one)	\$207,500.00																														
<div style="position: relative; width: 100%;"> <div style="position: absolute; top: -20px; left: 50%; transform: translate(-50%, -50%); opacity: 0.5; font-weight: bold; font-size: 2em;">POSTED</div> <p style="font-size: 1.5em; margin: 0;">BU # 1238-04-04</p> <p style="font-size: 1.5em; margin: 0;">10/6/04</p> <p style="font-size: 1.5em; margin: 0;">Robert [Signature]</p> </div>																															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">BU # <u>1238</u></td> <td style="width: 30%;">Supplier # <u>24601</u></td> <td style="width: 40%;"></td> </tr> <tr> <td>CapEx PO # <u>1238-04-07</u></td> <td></td> <td></td> </tr> <tr> <td>Invoice # <u>100404-140</u></td> <td></td> <td></td> </tr> <tr> <td>GL Acct. # <u>1132</u></td> <td>Description</td> <td style="text-align: right;">Amt</td> </tr> <tr> <td></td> <td></td> <td style="text-align: right;">207,500.</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td style="text-align: right;">Total</td> <td></td> </tr> <tr> <td>Manager Approval</td> <td style="text-align: right;">Date</td> <td></td> </tr> <tr> <td>Additional Approval <u>[Signature]</u></td> <td style="text-align: right;">Date <u>10/12/04</u></td> <td></td> </tr> </table>		BU # <u>1238</u>	Supplier # <u>24601</u>		CapEx PO # <u>1238-04-07</u>			Invoice # <u>100404-140</u>			GL Acct. # <u>1132</u>	Description	Amt			207,500.								Total		Manager Approval	Date		Additional Approval <u>[Signature]</u>	Date <u>10/12/04</u>	
BU # <u>1238</u>	Supplier # <u>24601</u>																														
CapEx PO # <u>1238-04-07</u>																															
Invoice # <u>100404-140</u>																															
GL Acct. # <u>1132</u>	Description	Amt																													
		207,500.																													
	Total																														
Manager Approval	Date																														
Additional Approval <u>[Signature]</u>	Date <u>10/12/04</u>																														
<b>TOTAL DUE THIS INVOICE</b>	<b>\$207,500.00</b>																														

THANK YOU FOR YOUR BUSINESS

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number:

*Palm Valley Utility #1238*

Is the project budgeted?:

Yes  No  Budgeted Amount \$: *215,000*

General Ledger Account #:

*1132*

Project Number From Budget:

*1238-04-07*

Preferred Vendor Name:

*Wayne's Sewerfund*

Street Address:

*P.O. Box 5777*

City, State and Zip

*Deltona, FL 32728*

Phone and Fax:

Description of Activity or Item:

*Effluent Pond*

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ *207,500*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: \_\_\_\_\_

Regional Manager Signature (for Family): *DC 10/14/04*

Division Vice Pres. Signature and Date: \_\_\_\_\_

Group President Signature and Date\*: *A. M. ... 10/13/04*

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached  
 Project Approval Only - Work is not Done

Purchase Order Number \_\_\_\_\_  
If this is an unbudgeted capex *Q1B 10/18/04*

**Forms to submit to receive Purchase Order:**  
(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).  
 Copy of Vendor's License  
 Copy of Vendor's Proof of Insurance with Additional Insured Information  
 Copy of Proof of Vendor's Workers Compensation Insurance  
 Copies of all Permits Required to Complete Work (Check here if none required )  
 Other Forms or Attachments  
OR:  
1<sup>st</sup> Vendor ID# *24601*  
2<sup>nd</sup> Vendor ID# \_\_\_\_\_  
3<sup>rd</sup> Vendor ID# \_\_\_\_\_  
4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)  
 Signed and Notarized Lien Waiver (notarized if required by state law)  
 Lien waiver not required  
 Original Invoice with completed Hometown payment stamps (include PO No. on invoice)  
 Approved Change Order(s), if applicable



BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	081004-106	8/10/2004	REPLACED COMPRESSOR	730.00		730.00
Payor: <b>Hometown America, LLC</b> Payee: <b>WAYNE'S DIVERSIFIED SERVICES</b> 24601				Date 9/2/2004	Check No. 79406	Check Amount \$*****730.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 9/2/2004      Check No.: 00079406      Check Amount: \$\*\*\*\*\*730.00

SEVEN HUNDRED THIRTY AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_

\_\_\_\_\_

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #081004-106

Billed to: Palm Valley	Invoice Date: Aug. 10, 2004
	Project Name: Decortive pond
	Location: Oviedo, Fl.
	Date of Service:

Replaced burned up compressor on aeration system

\$730.00

**POSTED**

*DMV*

*1238-04-07*

*BU# 1238*

*water plant permit issue*

*8/12/04*

*Robert Munro*

CP Limited Partnership  
 Date Received by A/P \_\_\_\_\_

Ven # 24601 Dev 1238

Acct # 1132 \$ 730.

Acct # \_\_\_\_\_ \$ \_\_\_\_\_

Acct # \_\_\_\_\_ \$ \_\_\_\_\_

Desc 1238-04-07

CRE# \_\_\_\_\_  
 Commitment Approval Date \_\_\_\_\_

Region Approval OC/vy Date 8/27/04

TOTAL DUE THIS INVOICE

\$730.00

THANK YOU FOR YOUR BUSINESS

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number: Palm Valley # 1238

Is the project budgeted?: Yes  No  Budgeted Amount \$: 215,000.

General Ledger Account #: 1132

Project Number From Budget: 123804-07

Preferred Vendor Name: Wayne's Diversified

Street Address: P.O. Box 5777

City, State and Zip: Deltona, FL 32728

Phone and Fax: \_\_\_\_\_

Description of Activity or Item: replace compressor + aeration systems

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 730.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: \_\_\_\_\_

Regional Manager Signature (for Family): [Signature] 8/27/09

Division Vice Pres. Signature and Date: \_\_\_\_\_

Group President Signature and Date\*: On file w/ previous request

V.P. signature required for all capex. Group President signature required for capex unbudgeted over budget or in excess of \$10,000

Pay from Original Invoices Attached  
 Project Approval Only - Work is not Done

Purchase Order Number \_\_\_\_\_  
If this is an unbudgeted capex AB 08/31/09

Forms to submit to receive Purchase Order:  
(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

- Copy of Vendor's License
- Copy of Vendor's Proof of Insurance with Additional Insured Information
- Copy of Proof of Vendor's Workers Compensation Insurance
- Copies of all Permits Required to Complete Work (Check here if none required \_\_\_\_\_)
- Other Forms or Attachments

OR:

- 1<sup>st</sup> Vendor ID# 24601
- 2<sup>nd</sup> Vendor ID# \_\_\_\_\_
- 3<sup>rd</sup> Vendor ID# \_\_\_\_\_
- 4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

- Signed and Notarized Lien Waiver (notarized if required by state law)
- Lien waiver not required
- Original Invoice with completed Hometown payment stamps (include PO No. on invoice)
- Approved Change Order(s), if applicable

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
2231	Palm Valley Utility	081004-105	8/10/2004	REMOVED PUMPS	4,775.00		4,775.00
Payor: Hometown America, LLC Payee: WAYNE'S DIVERSIFIED SERVICES 24601				Date	Check No.	Check Amount	
				9/2/2004	79407	\$*****4,775.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 9/2/2004      Check No.: 00079407      Check Amount: \$\*\*\*\*\*4,775.00

FOUR THOUSAND SEVEN HUNDRED SEVENTY FIVE AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_

\_\_\_\_\_

# AYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
 Deltona, FL 32728

(407) 330-7597 Inv. #081004-105

Billed to: Palm Valley	Invoice Date: Aug. 10, 2004
	Project Name: Irrigation pumps
	Location: Oviedo, FL
	Date of Service:

Removed existing pumps from clear well tank and installed new pumps. Existing pumps were burned up internally

\$4775.00

OLD 1238-04-07  
 BU# 1238  
 8/12/04  
 Robert Munro  
 Reuse IRR. pumps.

**POSTED**

CP Limited Partnership  
 Date Received by A/P \_\_\_\_\_  
 Ven # 24601 Dev 1238  
 Acct # -1132 \$ 4775.00  
 Acct # \_\_\_\_\_ \$ \_\_\_\_\_  
 Acct # \_\_\_\_\_ \$ \_\_\_\_\_  
 Desc 1238-04-07  
 CRF # \_\_\_\_\_  
 Community Approval \_\_\_\_\_ Date \_\_\_\_\_  
 Regional Approval DCN Date 8/27/04  
 Date Processed \_\_\_\_\_

TOTAL DUE THIS INVOICE

\$4775.00

THANK YOU FOR YOUR BUSINESS

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number:

*Palm Valley # 1238*

Is the project budgeted?:

Yes  No  Budgeted Amount \$: *215,000.*

General Ledger Account #:

*1132*

Project Number From Budget:

*123804-07*

Preferred Vendor Name:

*Wayne's Diversified*

Street Address:

*P.O. Box 5777*

City, State and Zip

*Deltona, FL 32728*

Phone and Fax:

Description of Activity or Item:

*replace new pumps*

List Bidder's Names and Bid Amounts: (Cost of Bid) \$

*4775.*

1

2

3

Comments on Bids:

Property Manager Signature and Date:

Regional Manager Signature (for Family):

*DC 8/27/04*

Division Vice Pres. Signature and Date:

Group President Signature and Date\*:

*On file w/ previous request*

V.P. signature required for all capex. Group President signature required for capex unbudgeted over budget or in excess of \$10,000

Pay from Original Invoices Attached

Project Approval Only - Work is not Done

Purchase Order Number

*If this is an unbudgeted capex 418 08/31/04*

Forms to submit to receive Purchase Order:

(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

- Copy of Vendor's License
- Copy of Vendor's Proof of Insurance with Additional Insured Information
- Copy of Proof of Vendor's Workers Compensation Insurance
- Copies of all Permits Required to Complete Work (Check here if none required )
- Other Forms or Attachments

OR:

1<sup>st</sup> Vendor ID#

*24601*

2<sup>nd</sup> Vendor ID#

3<sup>rd</sup> Vendor ID#

4<sup>th</sup> Vendor ID#

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

- Signed and Notarized Lien Waiver (notarized if required by state law)
- Lien waiver not required
- Original Invoice with completed Hometown payment stamps (include PO No. on invoice)
- Approved Change Order(s), if applicable

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1230	Palm Valley Utility	081004-104	8/10/2004	REPLACED STARTER	2,134.00		2,134.00
Payor: <b>Hometown America, LLC</b> Payee: <b>WAYNE'S DIVERSIFIED SERVICES</b> 24601				Date	Check No.	Check Amount	
				9/2/2004	79408	\$*****2,134.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 9/2/2004      Check No.: 00079408      Check Amount: \$\*\*\*\*\*2,134.00

TWO THOUSAND ONE HUNDRED THIRTY FOUR AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_

\_\_\_\_\_

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #081004-104

Billed to: palm Valley	Invoice Date: Aug. 10, 2004
	Project Name: Fox Row Lift Station
	Location: Oviedo, Fl.
	Date of Service:

Replaced 2hp pump and starter in panel

\$2134.00

**POSTED**

LD 1238-04-04  
 BU #1238  
 8/12/04

Robert Munro  
 permit issue

CP Limited Partnership  
 Date Received by A/P \_\_\_\_\_  
 Ven # 24601 Dev 1238  
 Acct # 1132 \$ 2134.  
 Acct # \_\_\_\_\_ \$ \_\_\_\_\_  
 Acct # \_\_\_\_\_ \$ \_\_\_\_\_  
 Desc \_\_\_\_\_  
 CRF \_\_\_\_\_  
 Com \_\_\_\_\_ Date \_\_\_\_\_  
 Rep. RC/vj Date 8/27/04  
 Date Processed \_\_\_\_\_

**TOTAL DUE THIS INVOICE**

**\$2134.00**

**THANK YOU FOR YOUR BUSINESS**



# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number:

Polyn Valley # 1238

Is the project budgeted?:

Yes  No  Budgeted Amount \$: 17,000.

General Ledger Account #:

1132

Project Number From Budget:

1238-04-04

Preferred Vendor Name:

Waynes Diversified

Street Address:

P.O. Box 5777

City, State and Zip

Deltona, Fl. 32728

Phone and Fax:

Description of Activity or Item:

panel

Replace pumps & starter

List Bidder's Names and Bid Amounts: (Cost of Bid) \$

2134.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date:

Regional Manager Signature (for Family):

DC 8/27/04

Division Vice Pres. Signature and Date:

Group President Signature and Date\*:

X [Signature] 8/27/04

M.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached

Project Approval Only - Work is not Done

Purchase Order Number

If this is an unbudgeted capex UB 08/31/04

### Forms to submit to receive Purchase Order:

(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

- Copy of Vendor's License
- Copy of Vendor's Proof of Insurance with Additional Insured Information
- Copy of Proof of Vendor's Workers Compensation Insurance
- Copies of all Permits Required to Complete Work (Check here if none required )
- Other Forms or Attachments

OR:

- 1<sup>st</sup> Vendor ID# 24601
- 2<sup>nd</sup> Vendor ID# \_\_\_\_\_
- 3<sup>rd</sup> Vendor ID# \_\_\_\_\_
- 4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

- Signed and Notarized Lien Waiver (notarized if required by state law)
- Lien waiver not required
- Original Invoice with completed Hometown payment stamps (include PO No. on invoice)
- Approved Change Order(s), if applicable

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #103105-170

Billed to: <b>Palm Valley MHP</b>	Invoice Date: <b>Oct. 31, 2005</b>
	Project Name: <b>Sewer plant</b>
	Location: <b>Oviedo, Fl.</b>
	Date of Service:

Completion, permitting and acceptance of effluent pumping and pond.

\$51368.00

*11/2/05*  
*BU#12380507*  
*Robert Munro*  
*JR*

BU # <i>1238</i>	Supplier # <i>24601</i>
CapEx PO # <i>1238-05-07</i>	
Invoice # <i>103105-170</i>	
GL Acct. # <i>1132</i>	Description: Amt
	<i>51,368.</i>
	Total
Manager Approval	Date
Additional Approval <i>OC/vj</i>	Date <i>11/2/05</i>

**TOTAL DUE THIS INVOICE**

**\$51,368.00**

**THANK YOU FOR YOUR BUSINESS**

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #103105-170

Billed to: <u>Palm Valley MHP</u>	Invoice Date: <u>Oct. 31, 2005</u>
	Project Name: <u>Sewer plant</u>
	Location: <u>Oviedo, Fl.</u>
	Date of Service: _____

Completion, permitting and acceptance of effluent pumping and pond.

\$51368.00

*11/2/05*  
*BU#12380507*  
*Robert Munro*  
*JND*

BU # <u>1238</u>	Supplier # <u>24601</u>
CapEx PO # <u>1238-05-07</u>	
Invoice # <u>103105-170</u>	
GL Acct. # <u>1132</u>	Description: _____
	Amt <u>51,368.</u>
	Total _____
Manager Approval _____	Date _____
Additional Approval <u>DC/uj</u>	Date <u>11/2/05</u>

**TOTAL DUE THIS INVOICE**

**\$51,368.00**

**THANK YOU FOR YOUR BUSINESS**

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley MHP	042806-070	4/28/2006	INSTALL NEW PUMP	21,230.00		21,230.00
Payon: Hometown America, LLC				Date: 6/8/2006	Check No: 181160	Check Amount: *****21,230.00	
Payee: WAYNE'S DIVERSIFIED SERVICES				24801			

Hometown America, LLC  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4182

Bank Of America  
 Chicago, IL 60614

**COPY**

Date: 6/8/2006  
 Check No: 00181160  
 Check Amount: \*\*\*\*\*21,230.00

TWENTY ONE THOUSAND TWO HUNDRED THIRTY AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #042806-070

Billed to: Palm Valley MHP	Invoice Date: April 28, 2006																								
	Project Name: Sewer plant																								
	Location: Oviedo, FL																								
	Date of Service:																								
Replaced 12" gravity main in main lift station installed new reuse pump installed new diffusers and cleaned piping																									
<table border="1"> <tr> <td>CU # 1238</td> <td>Supplier #</td> <td>24601</td> </tr> <tr> <td>CapEx PD #</td> <td>1238-06-08</td> <td></td> </tr> <tr> <td>Invoice #</td> <td>042806-070</td> <td></td> </tr> <tr> <td>GL Acct. #</td> <td>Description</td> <td>Am't</td> </tr> <tr> <td>11522</td> <td></td> <td>21,230.</td> </tr> <tr> <td colspan="2"></td> <td>Total</td> </tr> <tr> <td>Manager Approval</td> <td></td> <td>Date</td> </tr> <tr> <td>Additional Approval</td> <td><i>[Signature]</i></td> <td>Date 5/29/06</td> </tr> </table>		CU # 1238	Supplier #	24601	CapEx PD #	1238-06-08		Invoice #	042806-070		GL Acct. #	Description	Am't	11522		21,230.			Total	Manager Approval		Date	Additional Approval	<i>[Signature]</i>	Date 5/29/06
CU # 1238	Supplier #	24601																							
CapEx PD #	1238-06-08																								
Invoice #	042806-070																								
GL Acct. #	Description	Am't																							
11522		21,230.																							
		Total																							
Manager Approval		Date																							
Additional Approval	<i>[Signature]</i>	Date 5/29/06																							
<b>TOTAL DUE THIS INVOICE</b>																									
<b>\$21,230.00</b>																									

THANK YOU FOR YOUR BUSINESS

# WAYNE'S DIVERSIFIED SERVICES

PO: BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #100806-132

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	100806-132	10/8/2006	EFFLUENT DISPOSAL	5,600.00		5,600.00
Payor: Hometown America, LLC				Date: 11/2/2006	Check No: 205280	Check Amount: \$*****5,600.00	
Payee: WAYNE'S DIVERSIFIED SERVICES							
24601							

Hometown America, LLC  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

**COPY**

Date: 11/2/2006  
 Check No: 00205280  
 Check Amount: \$\*\*\*\*\*5,600.00

FIVE THOUSAND SIX HUNDRED AND 00/100

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

Billed to: <b>Palm Valley</b>	Invoice Date: <b>Oct. 8, 2006</b>																					
	Project Name: <b>Sewer plant</b>																					
	Location: <b>Oviedo, FL</b>																					
	Date of Service:																					
Installed 2 new effluent pumps in clean water tank	\$5600.00																					
<p>10/14/06                  BU# 1238                  Robert M. Muro</p>																						
<table border="1"> <tr> <td>BU # 1238</td> <td>Supplier # 24601</td> </tr> <tr> <td>CapEx PO #</td> <td>1238-016-012</td> </tr> <tr> <td>Invoice #</td> <td>100806-132</td> </tr> <tr> <td>GL Acct. #</td> <td>Description</td> <td>Amt</td> </tr> <tr> <td>1132</td> <td>EFFLUENT PUMPS IN WATER TANK</td> <td>5,600.00</td> </tr> <tr> <td colspan="2"></td> <td>Total 5,600.00</td> </tr> <tr> <td>Manager Approval</td> <td>(Signature)</td> <td>Date 10/24/06</td> </tr> <tr> <td>Additional Approval</td> <td></td> <td>Date</td> </tr> </table>		BU # 1238	Supplier # 24601	CapEx PO #	1238-016-012	Invoice #	100806-132	GL Acct. #	Description	Amt	1132	EFFLUENT PUMPS IN WATER TANK	5,600.00			Total 5,600.00	Manager Approval	(Signature)	Date 10/24/06	Additional Approval		Date
BU # 1238	Supplier # 24601																					
CapEx PO #	1238-016-012																					
Invoice #	100806-132																					
GL Acct. #	Description	Amt																				
1132	EFFLUENT PUMPS IN WATER TANK	5,600.00																				
		Total 5,600.00																				
Manager Approval	(Signature)	Date 10/24/06																				
Additional Approval		Date																				
<b>TOTAL DUE THIS INVOICE</b>																						
<b>\$5600.00</b>																						

THANK YOU FOR YOUR BUSINESS

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley MHP	082806-121	8/28/2006	INSTALL SURGE BLOWER	3,200.00		3,200.00
Payor: Hometown America, LLC				Date	Check No.	Check Amount	
Payee: WAYNE'S DIVERSIFIED SERVICES				10/1/2006	199059	\$*****3,200.00	
24601							

Hometown America, LLC  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 LL

**COPY**

Date: 10/1/2006  
 Check No.: 00199059  
 Check Amount: \$\*\*\*\*\*3,200.00

THREE THOUSAND TWO HUNDRED AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

# WAYNE'S DIVERSIFIED SERVICES

PO. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #082806-121

Billed to: Palm Valley MHP	Invoice Date: Aug. 28, 2006												
	Project Name: Sewer plant												
	Location: Oviedo, Fl.												
	Date of Service:												
Installed new surge blower 8/31/06 BU # 1238 <i>Robert Munro</i>	\$3200.00												
<table border="1"> <tr> <td>EU # 1138</td> <td>Supplier # 14601</td> </tr> <tr> <td>CapEx PO # 1238-06-01</td> <td></td> </tr> <tr> <td>Invoice # 082806-121</td> <td></td> </tr> <tr> <td>GL Acct. # 1152</td> <td>Amt 3200.</td> </tr> <tr> <td>Manager Approval</td> <td>Total</td> </tr> <tr> <td>Additional Approval: <i>DX/ky</i></td> <td>Date 9/15/06</td> </tr> </table>		EU # 1138	Supplier # 14601	CapEx PO # 1238-06-01		Invoice # 082806-121		GL Acct. # 1152	Amt 3200.	Manager Approval	Total	Additional Approval: <i>DX/ky</i>	Date 9/15/06
EU # 1138	Supplier # 14601												
CapEx PO # 1238-06-01													
Invoice # 082806-121													
GL Acct. # 1152	Amt 3200.												
Manager Approval	Total												
Additional Approval: <i>DX/ky</i>	Date 9/15/06												
<b>TOTAL DUE THIS INVOICE</b>													
	<b>\$3200.00</b>												

THANK YOU FOR YOUR BUSINESS



122 Wilshire Blvd.  
Casselberry, FL 32707

Invoice

Date	Invoice #
4/14/2006	6416

<b>Bill To</b> Hometown America, Inc. c/o Mr. Robert Msoro 1968 Inveracy Drive Orlando, FL 32826
--

P.O. No.	Terms	Project
CWS01-0905	15 DAYS	Palm Valley

Qty	Description	Rate	Amount																		
	Palm Valley MHP Surge Tank Replacement  Task 1 - Design & Permitting (Project review & coord; coord w/ FDEP regarding permit schedule, coord w/ Orlando Sentinel re: Public Notice; send legal affidavit of public notice to FDEP)																				
2.5	Clerical	40.00	100.00																		
	Orlando Sentinel Public Notice	461.15	461.15																		
u. 1238-06-52 Taking #'s from																					
<table border="1"> <tr> <td>CJH B38</td> <td>Signature #</td> <td>10850</td> </tr> <tr> <td>Cap: PDR</td> <td></td> <td>1238-06-52</td> </tr> <tr> <td>Invoice #</td> <td></td> <td>6416</td> </tr> <tr> <td>Gl. Acct #</td> <td></td> <td>1132</td> </tr> <tr> <td></td> <td></td> <td>561.15</td> </tr> <tr> <td colspan="2">           Manager Approval            Additional Approval         </td> <td>           Total            Date            Date         </td> </tr> </table>		CJH B38	Signature #	10850	Cap: PDR		1238-06-52	Invoice #		6416	Gl. Acct #		1132			561.15	Manager Approval Additional Approval		Total Date Date		
CJH B38	Signature #	10850																			
Cap: PDR		1238-06-52																			
Invoice #		6416																			
Gl. Acct #		1132																			
		561.15																			
Manager Approval Additional Approval		Total Date Date																			
Thank you and God Bless		Total	\$561.15																		



122 Wshire Blvd.  
Casselberry, FL 32707

# Invoice

Date	Invoice #
3/8/2006	6315

<b>Bill To</b>
Hometown America, Inc. c/o Mr. Robert Munro 1968 Inverary Drive Orlando, FL 32816

P.O. No.	Terms	Project
CWS01-0905	15 DAYS	Palm Valley

Qty	Description	Rate	Amount
	Palm Valley MBP Surge Tank Replacement  (Project review & coord; review RAI letter received from FDEP; verify Irrigation Acreage; prepare/submitt RAI response to FDEP; prepare and send recommendation letter for contractors bids)		
1	Senior Engineer	85.00	85.00
2.25	Clerical	40.00	90.00
	Copies		
	UPS to PDEP, 1/17/06	21.73	21.73
	Blueprints	19.87	19.87
	Total Reimbursable Expenses	7.00	7.00
			48.60

BU # 1238 Supplier # 10850  
 CapEx PO # 1238-0650  
 Invoice # 6315  
 GL Acct. # 1132 Description SUPGE TANK PROJECT Amt 223.60  
 Manager Approval *[Signature]* Total 223.60  
 Additional Approval Date 3-28-06

*Per Robert Munro*

Thank you and God Bless	<b>Total</b>	\$223.60
-------------------------	--------------	----------





122 Wilshire Blvd.  
Casselberry, FL 32707

# Invoice

Date	Invoice #
1/19/2006	6206

Bill To

Homtown America, Inc.  
c/o Mr. Robert Munro  
1968 Inventory Drive  
Orlando, FL 32826

P.O. No.	Terms	Project
CWS01-0905	15 DAYS	Palm Valley

Qty	Description	Rate	Amount
	Palm Valley MGP Surge Tank Replacement		
	(Project review & coord; review/revise CAD Drawings; prepare & submit permit package to FDEP for review; prepare and send bid packages to contractors for proposals; coord w/ client)		
1	Principal	135.00	135.00
12	Senior Engineer	85.00	1,020.00
16	Engineering Technician	50.00	800.00
3	Clerical	40.00	120.00
	Blk: 819# 123# Supplier # 10850	46.00	46.00
	CapEx PO # 1238-06-02		
	Invoice # 6206		
	GL Acct. # 1132 Description Amt 2121		
	Manager Approval: [Signature] Date: 2/2/06		
Thank you and God Bless			<b>Total</b> \$2,121.00

BU 1238	BU DISC Palm Valley MGP	INVOICE 8000	DATE 1/19/2006	REFERENCE SURBERTANK RFD	AMOUNT 2,121.00	DISC	NET 2,121.00
Payer: Homtown America, LLC	Payee: EXCEL ENGINEERING CONSULTANT I	Date: 3/16/2006	Check No. 48753	Check Amount \$4,000.00			

Homtown America, L.L.C.  
1501 Wilshire Drive, Ste 2800  
Chicago, IL 60606-4102

**COPY**

Check No. 00167573  
Date 3/16/2006  
Check Amount \$4,000.00

Pay to the order of:  
TWO THOUSAND ONE HUNDRED TWENTY ONE AND 00/100

EXCEL ENGINEERING CONSULTANT INC.  
122 WILSHIRE BLVD  
CASSELBERRY, FL 32707

1 of 1

BU	BY DISC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1258	Palm Valley Utility	0001306-040	3/16/2006	SURGETANK RPLC	57,250.00		57,250.00
Payor: HomeTown America, LLC		Date: 3/16/2006		Check No. 16789		Check Amount: \$57,250.00	
Payee: WAYNE'S DIVERSIFIED SERVICES		24801					

HomeTown America, LLC  
 501 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

**COPY**

THIRTY SEVEN THOUSAND TWO HUNDRED FIFTY AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 P.O. BOX 5177  
 DELTONA FL 32728

Check No. 00167679  
 Date 3/16/2006  
 Check Amount \$57,250.00

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #021306-040

Billed to: <u>Palm Valley MHP</u>	Invoice Date: <u>Feb 13, 2006</u>
	Project Name: <u>Surge tank/water mod</u>
	Location: <u>Oviedo, FL</u>
	Date of Service:

Contract amount  
 deposit/work completed to date  
 balance to complete

\$149,000.00  
 37,250.00  
 111,750.00

BU # <u>1238</u>	Supplier # <u>24601</u>
CapEx PO # <u>1238-06-U</u>	
Invoice # <u>021306-040</u>	
GL Acct. # <u>1132</u>	Description
	Amt <u>37,250</u>
Manager Approval	Date
Additional Approval	Date

*Superintendent Replacement  
 Mandated by FDEP*

TOTAL DUE THIS INVOICE

\$37,250.00

THANK YOU FOR YOUR BUSINESS



122 Wilshire Blvd.  
Casselberry, FL 32707

# Invoice

Date	Invoice #
12/7/2005	6115

Bill To
Hometown America, Inc. c/o Mr. Robert Munro 1968 Inverary Drive Orlando, FL 32826

P.O. No.	Terms	Project
CWS01-0905	15 DAYS	Palm Valley

Qty	Description	Rate	Amount																		
	Palm Valley MHP Surge Tank Replacement  (Project review & coord; coord w/ client; coord w/ contractor; begin preparation of engineering report and calculations; begin preparation of CAD drawings; site visit)																				
8.75	Senior Engineer	85.00	743.75																		
22.5	Staff Engineer	65.00	1,462.50																		
13.25	Engineering Technician	50.00	662.50																		
0.75	Clerical	40.00	30.00																		
	Camera & photo developing	16.52	16.52																		
	Blueprints	3.00	3.00																		
<p>12/26/05 BU # 1238 Robert Munro</p> <table border="1"> <tr> <td>1238 -</td> <td>Order # 10850</td> </tr> <tr> <td>BU #</td> <td>1238-06-06</td> </tr> <tr> <td>Invoice #</td> <td>6115</td> </tr> <tr> <td>GL Acct. #</td> <td>Description Amt</td> </tr> <tr> <td>1132</td> <td>Surge Tank 2918.27</td> </tr> <tr> <td>1132</td> <td></td> </tr> <tr> <td colspan="2">Total</td> </tr> <tr> <td>Manager Approval</td> <td>Date</td> </tr> <tr> <td>Additional Approval</td> <td>Date 1/11/06</td> </tr> </table>				1238 -	Order # 10850	BU #	1238-06-06	Invoice #	6115	GL Acct. #	Description Amt	1132	Surge Tank 2918.27	1132		Total		Manager Approval	Date	Additional Approval	Date 1/11/06
1238 -	Order # 10850																				
BU #	1238-06-06																				
Invoice #	6115																				
GL Acct. #	Description Amt																				
1132	Surge Tank 2918.27																				
1132																					
Total																					
Manager Approval	Date																				
Additional Approval	Date 1/11/06																				
Thank you and God Bless			Total \$2,918.27																		

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	70236	8/27/2004	WATER IRRIGATION SYSTE	10,500.00		10,500.00
Payor: <b>Hometown America, LLC</b> Payee: <b>LAWN ENFORCEMENT OF CENTRAL FL</b> 1230191				Date 9/9/2004	Check No. 80029	Check Amount \$****10,500.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 TL

**COPY**

Date: 9/9/2004      Check No.: 00080029      Check Amount: \$\*\*\*\*10,500.00

TEN THOUSAND FIVE HUNDRED AND 00/100\*\*\*\*\*

Pay to the order of:

LAWN ENFORCEMENT OF CENTRAL FL, INC.  
 7305 GARDNER ST.  
 WINTER PARK FL 32792

\_\_\_\_\_  
 \_\_\_\_\_



Lawn Enforcement

PO BOX 5873

WINTER PARK FL 32793-5873

PALM VALLEY  
OVIDO, FL.

70236

(407)657-2001

INVOICE DATE: 8-27-04 DESCRIPTION: RECLAIMED IRRIGATION CHARGES:

SERVICE FOR THE MONTH OF: AUGUST

SERVICES RENDERED: MATERIAL ADVANCE ON RECLAIMED  
WATER IRRIGATION SYSTEM FOR 25 HOMES.

TOTAL COST 17,500  
ADVANCE 7,000

8-27-04  
BU# 1238-04-U  
Robert Murray

POSTED

THANK YOU, Rick Sirey

DATE DUE: UPON RECEIPT TOTAL DUE:

10,500

A 1% PER MONTH INTEREST WILL BE CHARGED ON ANY ACCOUNT OVER 30 DAYS.

**CF Limited Partnership**

Date Received by A/P \_\_\_\_\_

Ven # 1230191 Dev 1238

Acct # 1132 \$ 10,500

Acct # \_\_\_\_\_ \$ \_\_\_\_\_

Acct # \_\_\_\_\_ \$ \_\_\_\_\_

Desc \_\_\_\_\_

CRF # \_\_\_\_\_

Community Approval \_\_\_\_\_ Date \_\_\_\_\_

Region: DC/Wy Date 8/30/04

Date Processed \_\_\_\_\_

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number:

Palm Valley Utility #1238

Is the project budgeted?:

Yes  No  Budgeted Amount \$: 30,000

General Ledger Account #:

1132

Project Number From Budget:

1238-04-05

Preferred Vendor Name:

Lawn Enforcement

Street Address:

7305 Gardner St.

City, State and Zip

Winter Park, FL 32792

Phone and Fax:

407-657-2001

Description of Activity or Item:

Irrigation

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 35,200.

1. Lawn Enforcement 24,200

2. \_\_\_\_\_

3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: \_\_\_\_\_

Regional Manager Signature (for Family):

DC 5/16/04

Division Vice Pres. Signature and Date: \_\_\_\_\_

Group President Signature and Date:

A.M. Morris 5/16/04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached  
 Project Approval Only - Work is not Done

Purchase Order Number \_\_\_\_\_  
If this is an unbudgeted capex QIB 09/07/04

Forms to submit to receive Purchase Order:  
(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

- Copy of Vendor's License
- Copy of Vendor's Proof of Insurance with Additional Insured Information
- Copy of Proof of Vendor's Workers Compensation Insurance
- Copies of all Permits Required to Complete Work (Check here if none required \_\_\_\_\_)
- Other Forms or Attachments

OR:

1<sup>st</sup> Vendor ID# 1230191

2<sup>nd</sup> Vendor ID# \_\_\_\_\_

3<sup>rd</sup> Vendor ID# \_\_\_\_\_

4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

- Signed and Notarized Lien Waiver (notarized if required by state law)
- Lien waiver not required
- Original Invoice with completed Hometown payment stamps (include PO No. on invoice)
- Approved Change Order(s), if applicable

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number:

Palm Valley # 1238

Is the project budgeted?:

Yes  No  Budgeted Amount \$: \_\_\_\_\_

General Ledger Account #:

1132

Project Number From Budget:

1238-04-05

Preferred Vendor Name:

Spinn Enforcement

Street Address:

7305 Gardner St.

City, State and Zip

Winters Park, FL 32792

Phone and Fax:

Description of Activity or Item:

Install reclaim water lines

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 17,500.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date:

[Signature] 10/5/04

Regional Manager Signature (for Family):

[Signature] 7/13/04

Division Vice Pres. Signature and Date:

[Signature] 10/5/04

Group President Signature and Date:

[Signature] 7/14/04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached

Project Approval Only -- Work is not Done

Purchase Order Number 1238-04-05

If this is an unbudgeted capex HB 10/07/04

Forms to submit to receive Purchase Order:

(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

- Copy of Vendor's License
- Copy of Vendor's Proof of Insurance with Additional Insured Information
- Copy of Proof of Vendor's Workers Compensation Insurance
- Copies of all Permits Required to Complete Work (Check here if none required )
- Other Forms or Attachments

OR:

- 1<sup>st</sup> Vendor ID# 1230191
- 2<sup>nd</sup> Vendor ID# \_\_\_\_\_
- 3<sup>rd</sup> Vendor ID# \_\_\_\_\_
- 4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

- Signed and Notarized Lien Waiver (notarized if required by state law)
- Lien waiver not required
- Original Invoice with completed Hometown payment stamps (include PO No. on invoice)
- Approved Change Order(s), if applicable



BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	70257	8/4/2004	GATE & PLUG VALVES	7,800.00		7,800.00
Payor: <b>Hometown America, LLC</b> Payee: <b>LAWN ENFORCEMENT OF CENTRAL FL</b> 1230191				Date	Check No.	Check Amount	
				9/1/2004	77805	\$*****7,800.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 9/1/2004      Check No.: 00077805      Check Amount: \$\*\*\*\*\*7,800.00

SEVEN THOUSAND EIGHT HUNDRED AND 00/100\*\*\*\*\*

Pay to the order of:

LAWN ENFORCEMENT OF CENTRAL FL, INC.  
 7305 GARDNER ST.  
 WINTER PARK FL 32792

\_\_\_\_\_  
 \_\_\_\_\_



Lawn Enforcement

PO BOX 5873

WINTER PARK FL 32793-5873

PALM VALLEY  
OUIDO FL

70257

(407)657-2001

INVOICE DATE: 8-4-04 DESCRIPTION: IRRIGATION

CHARGES:

SERVICE FOR THE MONTH OF: AUGUST

SERVICES RENDERED:

NEW 4" RE-CLAIMED WATER  
LINE AS PER PRO POSAL

Cap X project # 1238-04-01  
8/5/04  
Ralph Munro

CP Limited Partnership

Date Received by A/P

Ven # 1230191 Dev 1238

Acct # 1132 \$ 7,000

Acct # - \$ -

Acct # - \$ -

Desc 1238-04-01

CRP Approval Date

THANK YOU,

*R. Salby*

DATE DUE RECEIVED TOTAL DUE

A 1% PER MONTH INTEREST WILL BE CHARGED ON ANY ACCOUNT OVER 30 DAYS.

8/19/04  
1,800.00

P. 05  
P. 01

FAX NO. 11  
FAX NO. 11

AUG-24-04 TUE 09:51 AM HOMETOWN AMERICA  
JUL-14-04 WED 02:40 PM HOMETOWN AMERICA

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number: Palm Valley Utility #1238

Is the project budgeted?: Yes  No  Budgeted Amount \$: 7,000

General Ledger Account #: 1132

Project Number From Budget: 1238-04-01

Preferred Vendor Name: Lawn Enforcement

Street Address: 7305 Linden St.

City, State and Zip: Winter Park, FL 32792

Phone and Fax: \_\_\_\_\_

Description of Activity or Item: Gate & plug valves

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 7,800.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: \_\_\_\_\_

Regional Manager Signature (for Family): DC 7/6/04

Division Vice Pres. Signature and Date: \_\_\_\_\_

Group President Signature and Date\*: R.M. Mani 8/23/04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached  
 Project Approval Only - Work is not Done

Purchase Order Number 1238-04-01  
If this is an unbudgeted capex 298/24

Forms to submit to receive Purchase Order:  
(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).  
\_\_\_\_ Copy of Vendor's License  
\_\_\_\_ Copy of Vendor's Proof of Insurance with Additional Insured Information  
\_\_\_\_ Copy of Proof of Vendor's Workers Compensation Insurance  
\_\_\_\_ Copies of all Permits Required to Complete Work (Check here if none required \_\_\_\_\_)  
\_\_\_\_ Other Forms or Attachments  
OR:  
1<sup>st</sup> Vendor ID# 1230191  
2<sup>nd</sup> Vendor ID# \_\_\_\_\_  
3<sup>rd</sup> Vendor ID# \_\_\_\_\_  
4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)  
\_\_\_\_ Signed and Notarized Lien Waiver (notarized if required by state law)  
\_\_\_\_ Lien waiver not required  
\_\_\_\_ Original Invoice with completed Hometown payment stamps (include PO No. on invoice)  
\_\_\_\_ Approved Change Order(s), if applicable

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	70256	8/4/2004	IRRIGATION SYSTEM	18,200.00		18,200.00
Payor: Hometown America, LLC Payee: LAWN ENFORCEMENT OF CENTRAL FL 1230191				Date	Check No.	Check Amount	
				8/24/2004	77387	\$****18,200.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 8/24/2004  
 Check No.: 00077387  
 Check Amount: \$\*\*\*\*18,200.00

EIGHTEEN THOUSAND TWO HUNDRED AND 00/100\*\*\*\*\*

Pay to the order of:

LAWN ENFORCEMENT OF CENTRAL FL, INC.  
 7305 GARDNER ST.  
 WINTER PARK FL 32792

\_\_\_\_\_  
 \_\_\_\_\_

*Lawn Enforcement* **PALM VALLEY**  
 PO BOX 5873  
 WINTER PARK FL 32793-5873 **DUKE, FL.**

**70256**  
 (407)657-2001

INVOICE DATE: <b>8/4/04</b>	DESCRIPTION: <b>IRRIGATION</b>	CHARGES:
SERVICE FOR THE MONTH OF: <b>AUGUST</b>		
SERVICES RENDERED: <b>IRRIGATION SYSTEM FOR</b>		
<b>EEF-20 - 2 SECTIONS AS PER PROPOSAL,</b>		<b>\$ 25,200</b>
<b>MINUS FIRST DRAW</b>		<b>7,000</b>
<b>Final draw capx # 1238-04-05</b>		
<b>8.5.04</b>		<b>Balance \$ 18,200</b>
<b>Rafael Munro</b>		
THANK YOU, <b>Rafael Munro</b>	<b>UPON</b>	
	DATE DUE: <b>RECEIPT</b>	TOTAL DUE: <b>\$ 18,200</b>
A 1% PER MONTH INTEREST WILL BE CHARGED ON ANY ACCOUNT OVER 30 DAYS.		

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number: Palm Valley Utility #1238

Is the project budgeted?: Yes  No  Budgeted Amount \$: 30,000

General Ledger Account #: 1132

Project Number From Budget: 1238-04-05

Preferred Vendor Name: Lawn Enforcement

Street Address: 7305 Gardner St.

City, State and Zip: Winter Park, Fl. 32792

Phone and Fax: 407-657-2001

Description of Activity or Item: Irrigation

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 35,200

1. Lawn Enforcement 34,200

2. \_\_\_\_\_

3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: \_\_\_\_\_

Regional Manager Signature (for Family): DC 5/16/04

Division Vice Pres. Signature and Date: \_\_\_\_\_

Group President Signature and Date: A.M. Morris 5/16/04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached

Project Approval Only - Work is not Done

Purchase Order Number 1238 04 05

If this is an unbudgeted capex 8/110

Forms to submit to receive Purchase Order:

(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

- Copy of Vendor's License
- Copy of Vendor's Proof of Insurance with Additional Insured Information
- Copy of Proof of Vendor's Workers Compensation Insurance
- Copies of all Permits Required to Complete Work (Check here if none required )
- Other Forms or Attachments

OR:

1<sup>st</sup> Vendor ID# 1230191

2<sup>nd</sup> Vendor ID# \_\_\_\_\_

3<sup>rd</sup> Vendor ID# \_\_\_\_\_

4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

- Signed and Notarized Lien Waiver (notarized if required by state law)
- Lien waiver not required
- Original Invoice with completed Hometown payment stamps (include PO No. on invoice)
- Approved Change Order(s), if applicable

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	70220	7/28/2004	FIRST DRAW IRRIGATION	7,000.00		7,000.00
Payor: Hometown America, LLC Payee: LAWN ENFORCEMENT OF CENTRAL FL 1230191				Date: 8/17/2004	Check No: 76259	Check Amount: \$*****7,000.00	

**Hometown America, LLC**  
150 N. Wacker Drive, Ste 2800  
Chicago, IL 60606-4102

Bank Of America  
Chicago, IL 60634

2-3  
710 IL

**COPY**

Date: 8/17/2004      Check No: 00076259      Check Amount: \$\*\*\*\*\*7,000.00

SEVEN THOUSAND AND 00/100\*\*\*\*\*

Pay to the order of:

LAWN ENFORCEMENT OF CENTRAL FL, INC.  
7305 GARDNER ST.  
WINTER PARK FL 32792



*Lawn Enforcement*  
PO BOX 5873  
WINTER PARK FL 32793-5873

*PALM VALLEY  
ORL FL*

70220

(407)657-2001

INVOICE DATE: *7-28-04* DESCRIPTION: *REUSE IRRIGATION* CHARGES:

SERVICE FOR THE MONTH OF:

SERVICES RENDERED: *FIRST DRAW ON \$25,200.00*  
*FOR EFF 20 OF \$7,000.00*

*BALANCE OF \$18,200.00 UPON*  
*COMPLETION.*

*Copy # 1238-04-05*  
*7/29/04 Robert Munro*

THANK YOU, *R. Selby* DATE DUE: *7-28-04* TOTAL DUE: *\$7,000.00*

A 1 1/2% PER MONTH INTEREST WILL BE CHARGED ON ANY ACCOUNT OVER 30 DAYS.

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number: Palm Valley Utilities #1238

Is the project budgeted?: Yes  No  Budgeted Amount \$ 30,000

General Ledger Account #: 1132

Project Number From Budget: 1238-04-05

Preferred Vendor Name: Lawn Enforcement

Street Address: 7305 Gardner St.

City, State and Zip: Winter Park, Fl. 32792

Phone and Fax: 407-657-2001

Description of Activity or Item: Irrigation

List Bidder's Names and Bid Amounts: (Cost of Bid) ~~\$45,200.~~

1. Lawn Enforcement 34,200 - DC

2. \_\_\_\_\_

3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: \_\_\_\_\_

Regional Manager Signature (for Family): DC 5/6/04

Division Vice Pres. Signature and Date: \_\_\_\_\_

Group President Signature and Date\*: R.M. Mann 5/6/04

\* V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached

Project Approval Only - Work is not Done

Purchase Order Number 1238-04-05

If this is an unbudgeted capex NO  
5/3/04

**Forms to submit to receive Purchase Order:**  
(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

Copy of Vendor's License

Copy of Vendor's Proof of Insurance with Additional Insured Information

Copy of Proof of Vendor's Workers Compensation Insurance

Copies of all Permits Required to Complete Work (Check here if none required )

Other Forms or Attachments

OR:

1<sup>st</sup> Vendor ID# 1230191

2<sup>nd</sup> Vendor ID# \_\_\_\_\_

3<sup>rd</sup> Vendor ID# \_\_\_\_\_

4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

Signed and Notarized Lien Waiver (notarized if required by state law)

Lien waiver not required

Original Invoice with completed Hometown payment stamps (include PO No. on invoice)

Approved Change Order(s), if applicable

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	70222	6/16/2004	ABOVE GROUND IRRIGATIO	9,000.00		9,000.00
Payor: Hometown America, LLC Payee: LAWN ENFORCEMENT OF CENTRAL FL 1230191				Date: 6/24/2004	Check No.: 66435	Check Amount: \$*****9,000.00	

**Hometown America, LLC**  
150 N. Wacker Drive, Ste 2800  
Chicago, IL 60606-4102

Bank Of America  
Chicago, IL 60634

2-3  
710 IL

**COPY**

Date: 6/24/2004      Check No.: 00066435      Check Amount: \$\*\*\*\*\*9,000.00

NINE THOUSAND AND 00/100\*\*\*\*\*

Pay to the order of:

LAWN ENFORCEMENT OF CENTRAL FL, INC.  
7305 GARDNER ST.  
WINTER PARK FL 32792

\_\_\_\_\_  
\_\_\_\_\_



*Lawn Enforcement*  
PO BOX 5873  
WINTER PARK FL 32793-5873

*PALM VALLEY  
ORCL, FL.*

**70222**  
**(407)657-2001**

INVOICE DATE: <i>6-16-04</i>	DESCRIPTION: <i>IRRIGATION</i>	CHARGES:
SERVICE FOR THE MONTH OF: <i>JUNE</i>		
SERVICES RENDERED: <i>AS PER PROPOSAL, ABOVE GROUND IRRIGATION FOR EFF 5, NEW SYSTEM.</i>		<i>\$9,000.00</i>
<i>6/16/04 Robert Munro CAP # 1238-04-05</i>		
<i>PHASE I of III</i>		
THANK YOU, <i>R Silky</i>	DATE DUE: <i>UPON RECEIPT</i>	TOTAL DUE:
A 1% PER MONTH INTEREST WILL BE CHARGED ON ANY ACCOUNT OVER 30 DAYS.		



# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number:

Palm Valley Utility #1238

Is the project budgeted?:

Yes  No  Budgeted Amount \$ 30,000

General Ledger Account #:

1132

Project Number From Budget:

1238-04-05

Preferred Vendor Name:

Lawn Enforcement

Street Address:

7305 Gardner St.

City, State and Zip

Winter Park, Fl. 32792

Phone and Fax:

407-657-2001

Description of Activity or Item:

Irrigation

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 35,200.

1. Lawn Enforcement

34,200

2.

Comments on Bids:

Property Manager Signature and Date:

Regional Manager Signature (for Family):

DC 5/16/04

Division Vice Pres. Signature and Date:

Group President Signature and Date\*:

A.M. Morris 5/16/04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached

Project Approval Only - Work is not Done

Purchase Order Number 1238-04-05

If this is an unbudgeted capex

RCW 6/21/04

Forms to submit to receive Purchase Order:

(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

Copy of Vendor's License

Copy of Vendor's Proof of Insurance with Additional Insured Information

Copy of Proof of Vendor's Workers Compensation Insurance

Copies of all Permits Required to Complete Work (Check here if none required )

Other Forms or Attachments

OR:

1<sup>st</sup> Vendor ID# 1230191

2<sup>nd</sup> Vendor ID# \_\_\_\_\_

3<sup>rd</sup> Vendor ID# \_\_\_\_\_

4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

Signed and Notarized Lien Waiver (notarized if required by state law)

Lien waiver not required

Original Invoice with completed Hometown payment stamps (include PO No. on invoice)

Approved Change Order(s), if applicable





# LAWN ENFORCEMENT

LANDSCAPING AND MAINTENANCE 7305 Gardner St. • P.O. Box 5873 Winter Park, FL 32792  
(407) 657-2001

TO: Robert Nunno  
SUBJECT: Palm Valley 17,500.00

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	70236	8/27/2004	WATER IRRIGATION SYSTE	10,500.00		10,500.00
<i>Received</i>				<i>9/13/04</i>			
Payor: <b>Hemlock America, LLC</b> Payee: <b>LAWN ENFORCEMENT OF CENTRAL FL</b>				Date: <b>9/9/2004</b>	Check No. <b>80029</b>	Check Amount <b>\$****10,500.00</b>	

*will consider this an advance  
for invoice 70236 17,500  
- 10,500  
= 7,000.00 balance*

SIGNED: *[Signature]* DATE: *9/17/04*

**Hometown America Capital Expenditure Purchase Order**  
 (A Separate Purchase order is required for each Project)

Property Name and Number: Palm Valley # 1238

Is the project budgeted?: Yes  No  Budgeted Amount \$: \_\_\_\_\_

General Ledger Account #: 1132

Project Number From Budget: 1238-04-05

Preferred Vendor Name: Sawn Enforcement

Street Address: 7305 Gardner St.

City, State and Zip: Winter Park, FL 32794

Phone and Fax: \_\_\_\_\_

Description of Activity or Item: Install reclaim water lines

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 17,500.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: [Signature] 10/5/04

Regional Manager Signature (for Family): [Signature] 7/13/04

Division Vice Pres. Signature and Date: [Signature] 10/5/04

Group President Signature and Date\*: [Signature] 7/14/04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached  
 Project Approval Only - Work is not Done

Purchase Order Number 1238-04-05  
 If this is an unbudgeted capex HB 10/07/04

Forms to submit to receive Purchase Order:  
 (Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

Copy of Vendor's License  
 Copy of Vendor's Proof of Insurance with Additional Insured Information  
 Copy of Proof of Vendor's Workers Compensation Insurance  
 Copies of all Permits Required to Complete Work (Check here if none required )  
 Other Forms or Attachments

OR:

1<sup>st</sup> Vendor ID# 1230191  
 2<sup>nd</sup> Vendor ID# \_\_\_\_\_  
 3<sup>rd</sup> Vendor ID# \_\_\_\_\_  
 4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

Signed and Notarized Lien Waiver (notarized if required by state law)  
 Lien waiver not required  
 Original Invoice with completed Hometown payment stamps (include PO No. on invoice)  
 Approved Change Order(s), if applicable

## View Today's Stop Payment Confirmations

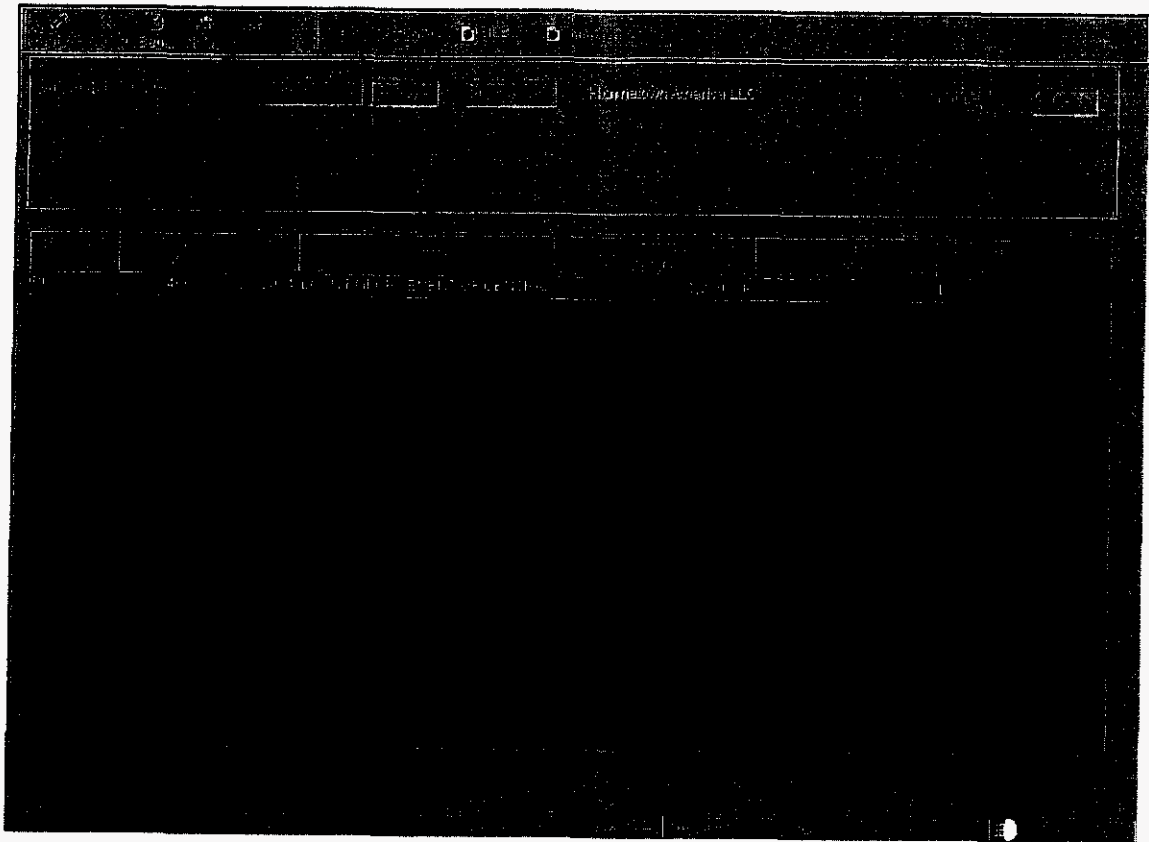
• [View Stop Payment Confirmation History](#)

Stop payment confirmations last updated at: 04/23/2004 at 16:30:22 CDT

Account:

<b>Account:</b> 8666100299	<b>Expire Date:</b> 04/02/2004	<b>Type:</b> Stop Place
<b>Check #:</b> 0000046683	<b>Effective Date:</b> 04/23/2004	<b>Bank Status:</b> Rejected
<b>Amount:</b> 1,200.00	<b>Request User:</b> CC02451 1	<b>Reason:</b>
<b>Payee:</b> Lawn Enforcement of Central		<b>Activity Status:</b> Confirmed
<b>Memo:</b>		
<b>Alert:</b> Stop Place Rejected. Stop Payment found for account, amount, and check #.		
<b>Account:</b> 8666100299	<b>Expire Date:</b> 10/25/2004	<b>Type:</b> Stop Place
<b>Check #:</b> 0000046512	<b>Effective Date:</b> 04/23/2004	<b>Bank Status:</b> Accepted
<b>Amount:</b> 367.28	<b>Request User:</b> CC02451 1	<b>Reason:</b>
<b>Payee:</b> Acorn Safe & Lock		<b>Activity Status:</b> Confirmed
<b>Memo:</b>		
<b>Account:</b> 8666100299	<b>Expire Date:</b> 10/25/2004	<b>Type:</b> Stop Place
<b>Check #:</b> 0000042611	<b>Effective Date:</b> 04/23/2004	<b>Bank Status:</b> Accepted
<b>Amount:</b> 377.56	<b>Request User:</b> CC02451 1	<b>Reason:</b>
<b>Payee:</b> Dickinson, Jason		<b>Activity Status:</b> Confirmed
<b>Memo:</b>		

123 091



BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	100404-145	10/4/2004	HURRICANE-FURNISH & IN	30,000.00		30,000.00
Payor: Hometown America, LLC Payee: WAYNE'S DIVERSIFIED SERVICES 24601				Date 11/1/2004	Check No. 88754	Check Amount \$****30,000.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 11/1/2004      Check No.: 00088754      Check Amount: \$\*\*\*\*30,000.00

THIRTY THOUSAND AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_

\_\_\_\_\_

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #100404-145

Billed to: <u>Palm Valley</u>	Invoice Date: <u>Oct. 04, 2004</u>	
	Project Name: <u>Sewer plant</u>	
	Location: <u>Oviedo, Fl.</u>	
<del>XXXXXXXXXXXXXXXXXXXX</del>	Date of Service:	
<p>Furnish and install new Lamson centrifical blower and control panel</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p>BU # <u>1238</u> Supplier # <u>24601</u>                      CapEx PO # _____                      Invoice # <u>100404-145</u>                      GL Acct. # <u>8600.105</u> Description _____ Amt <u>30,000.</u>                      _____                      _____                      _____                      Total _____                      Date _____                      Manager Approval _____ Date _____                      Additional Approval <u>RC/vj</u> Date <u>10/28/04</u></p> </div> <p style="font-size: 2em; margin-top: 20px; text-align: center;">BU # 1238 10/6/04 Robert</p>		<p>\$30,000.00</p>
<b>TOTAL DUE THIS INVOICE</b>		<b>\$30,000.00</b>

THANK YOU FOR YOUR BUSINESS



BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	102004-150	10/20/2004	HURRICANE-SEWER PLANT	1,123.00		1,123.00
Payor: Hometown America, LLC Payee: WAYNE'S DIVERSIFIED SERVICES 24601				Date 11/1/2004	Check No. 88757	Check Amount \$*****1,123.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 11/1/2004  
 Check No.: 00088757  
 Check Amount: \$\*\*\*\*\*1,123.00

ONE THOUSAND ONE HUNDRED TWENTY THREE AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_

\_\_\_\_\_



BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	071104-104	7/11/2004	SEWER REPAIR	50.00		250.00
Payor: <b>Hometown America, LLC</b> Payee: <b>WAYNE'S DIVERSIFIED SERVICES</b> 24601				Date	Check No.	Check Amount	
				8/1/2004	73125	\$*****250.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

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 710 IL

**COPY**

Date: 8/1/2004      Check No.: 00073125      Check Amount: \$\*\*\*\*\*250.00

TWO HUNDRED FIFTY AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_  
 \_\_\_\_\_

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #071104-104

Billed to: <u>Palm Valley</u>	Invoice Date: <u>July 11, 2004</u>
	Project Name: <u>Sewer plant</u>
	Location: <u>Oviedo, Fl.</u>
	Date of Service: <u>July 9, 2004</u>
Perform PM on 2 Sutterbilt blowers new belts, intake filters, grease and oil change	\$250.00
<div style="border: 1px solid black; padding: 5px; display: inline-block; transform: rotate(-2deg);">POSTED</div>	
BU # 1238 Robert Munro 7/14/04	CP Limited Partnership Date Received by A/P _____ Ven # <u>24601</u> Dev <u>1238</u> Acct # <u>7400.1900</u> \$ <u>250.</u> Acct # _____ \$ _____ Acct # _____ \$ _____ Desc _____ CRF # _____ Community Approval _____ Date _____ Regional Approval <u>DC/vj</u> Date <u>7/23/04</u> Date processed _____
<div style="border: 1px solid black; border-radius: 50%; padding: 10px; display: inline-block;">                     Sewer wwTP                      repair                 </div>	
<b>TOTAL DUE THIS INVOICE</b>	<b>\$250.00</b>

THANK YOU FOR YOUR BUSINESS

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	083004-122	8/30/2004	CHARLEY-RPLC COMPRESSO	8,068.00		8,068.00
Payor: <b>Hometown America, LLC</b> Payee: <b>WAYNE'S DIVERSIFIED SERVICES</b> 24601				Date	Check No.	Check Amount	
				9/17/2004	81661	\$*****8,068.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 9/17/2004      Check No.: 00081661      Check Amount: \$\*\*\*\*\*8,068.00

**EIGHT THOUSAND SIXTY EIGHT AND 00/100\*\*\*\*\***

*Pay to the order of:*

**WAYNE'S DIVERSIFIED SERVICES**  
**PO BOX 5177**  
**DELTONA FL 32728**

\_\_\_\_\_

\_\_\_\_\_

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
Deltona, FL 32728  
(407) 330-7597

Inv. #083004-122

Billed to: <u>Palm ValleyMHP</u>	Invoice Date: <u>Aug. 30, 2004</u>
	Project Name: <u><del>Industrial Damages</del></u>
	Location: <u>Oviedo, Fl.</u>
	Date of Service:

Replace Whitewater compressor on pressure vessel	\$1550.00
replace breaker for Panel K	330.00
repair air piping	1430.00
repair 6" water line in area 8	4758.00

**CP Limited Partnership**

Date Received by A/P \_\_\_\_\_

Ven # 2460 Dev 1238

Acct # 8600-106 \$ 8068

Acct # - \$ \_\_\_\_\_

Acct # - \$ \_\_\_\_\_

Desc \_\_\_\_\_

CRF # \_\_\_\_\_

Company Approval \_\_\_\_\_ Date \_\_\_\_\_

Regional Approval DTVJ Date 9/16/04

Date Processed \_\_\_\_\_

*BU# 8600.106 (1238)  
9/11/04  
Robert Munro*

TOTAL DUE THIS INVOICE

\$8068.00

THANK YOU FOR YOUR BUSINESS



BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	062104-085	6/21/2004	WATER TANK ADJUSTMENT	250.00		250.00
Payor: <b>Hometown America, LLC</b> Payee: <b>WAYNE'S DIVERSIFIED SERVICES</b> 24601				Date	Check No.	Check Amount	
				7/6/2004	68613	\$*****250.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 7/6/2004      Check No.: 00068613      Check Amount: \$\*\*\*\*\*250.00

TWO HUNDRED FIFTY AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_  
 \_\_\_\_\_

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
Deltona, FL 32728  
(407) 330-7597

Inv. #062104-085

Billed to: <b>Palm Valley</b>	Invoice Date: <b>June 21, 2004</b>
	Project Name: <b>Water plant</b>
	Location: <b>Oviedo, FL</b>
	Date of Service:
<p>Respond to operators emergency call of hydro tank water log<del>ged</del> and PRV spraying all over. Found PRV need slight adjustment. All OK</p> <p style="text-align: right; font-weight: bold;">\$250.00</p>	
<p>CP Limited Partnership Date Received by A/P _____</p> <p>Ven # <u>24601</u> Dev <u>1238</u></p> <p>Acct # <u>7400-2000</u> \$ <u>250.</u></p> <p>Acct # _____ \$ _____</p> <p>Acct # _____ \$ _____</p> <p>Desc _____</p> <p>CRF # _____</p> <p>Community Approval _____ Date _____</p> <p>Regional Approval <u>OC/vy</u> Date <u>6/25/04</u></p> <p>Date Processed _____</p>	
<p><b>BU # 1238</b></p> <p><b>Robert Munro</b></p> <p><b>6/23/04</b></p>	
<p><b>TOTAL DUE THIS INVOICE</b></p>	
<p><b>\$250.00</b></p>	

POSTED

THANK YOU FOR YOUR BUSINESS

*AV Utility  
Munro*



BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	061204-083	6/12/2004	INSTALL BLOWER ON SURG	1,630.00		1,630.00
Payor: Hometown America, LLC Payee: WAYNE'S DIVERSIFIED SERVICES 24601				Date 7/13/2004	Check No. 69793	Check Amount \$*****1,630.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 7/13/2004      Check No.: 00069793      Check Amount: \$\*\*\*\*\*1,630.00

ONE THOUSAND SIX HUNDRED THIRTY AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_

\_\_\_\_\_

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
Deltona, FL 32728  
(407) 330-7597

Inv. #061204-083

Billed to: <u>Palm Valley</u>	Invoice Date: <u>June 12, 2004</u>
	Project Name: <u>Sewer plant</u>
	Location: <u>Oviedo, FL</u>
	Date of Service:

Install new blower on surge tank

\$1630.00

**CP Limited Partnership**

Date Received by A/P \_\_\_\_\_

Ven # 24601 Dev 1238

Acct # 1132 \$ 1630

Acct # - \$ \_\_\_\_\_

Acct # - \$ \_\_\_\_\_

Desc 1238-04-U

CRF # \_\_\_\_\_

Community Approval \_\_\_\_\_ Date \_\_\_\_\_

Regional Approval DCing Date 6/28/04

Date Processed \_\_\_\_\_

POSTED

6/23/04

BU #1238

Robert Munro

TOTAL DUE THIS INVOICE

\$1630.00

THANK YOU FOR YOUR BUSINESS

1238-04-05  
CAP X

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number: Palm Valley #1238

Is the project budgeted?: Yes  No  Budgeted Amount \$: \_\_\_\_\_

General Ledger Account #: ~~\_\_\_\_\_~~ 1165

Project Number From Budget: 1238-04-U

Preferred Vendor Name: Waynes Diversified

Street Address: PO Box 5477

City, State and Zip: Deltona, Fl. 32728

Phone and Fax: \_\_\_\_\_

Description of Activity or Item: New Compressor or hydro tank  
& new blower on surge tank

List Bidder's Names and Bid Amounts: (Cost of Bid) \$

1.	<u>2175.</u>
2.	<u>1630.</u>
3.	<u>#3,805.</u>

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: \_\_\_\_\_

Regional Manager Signature (for Family): DC 7/2/04

Division Vice Pres. Signature and Date: \_\_\_\_\_

Group President Signature and Date\*: r.m. [signature] 7-2-04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached  
 Project Approval Only - Work is not Done

Purchase Order Number 1238-04-51  
If this is an unbudgeted capex end 7/2/04

Forms to submit to receive Purchase Order:  
(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

- Copy of Vendor's License
- Copy of Vendor's Proof of Insurance with Additional Insured Information
- Copy of Proof of Vendor's Workers Compensation Insurance
- Copies of all Permits Required to Complete Work (Check here if none required )
- Other Forms or Attachments

OR:

1<sup>st</sup> Vendor ID# 24601

2<sup>nd</sup> Vendor ID# \_\_\_\_\_

3<sup>rd</sup> Vendor ID# \_\_\_\_\_

4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

- Signed and Notarized Lien Waiver (notarized if required by state law)
- Lien waiver not required
- Original Invoice with completed Hometown payment stamps (include PO No. on invoice)
- Approved Change Order(s), if applicable

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	061204-082	6/12/2004	INSTALL WHITEWATER COM	2,175.00		2,175.00
Payor: Hometown America, LLC Payee: WAYNE'S DIVERSIFIED SERVICES 24501				Date 7/13/2004	Check No. 69794	Check Amount \$*****2,175.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 7/13/2004  
 Check No.: 00069794  
 Check Amount: \$\*\*\*\*\*2,175.00

TWO THOUSAND ONE HUNDRED SEVENTY FIVE AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_  
 \_\_\_\_\_

# WAYNE'S DIVERSIFIED SERVICES.

P.O. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #061204-082

Billed to: <b>Palm Valley</b>	Invoice Date: <b>June 12, 2004</b>
	Project Name: <b>Water plant</b>
	Location: <b>Oviedo, FL</b>
	Date of Service:
Installed new Whitewater compressor on hydro tank Cleaned both aeration towers	\$1325.00 850.00
<p><b>CP Limited Partnership</b>                  Date Received by A/P _____</p> <p>Ven # <u>24601</u> Dev <u>1238</u></p> <p>Acct # <u>1132</u> \$ <u>2175.</u></p> <p>Acct # <u>-</u> \$ _____</p> <p>Acct # <u>-</u> \$ _____</p> <p>Desc <u>1238-04-U</u></p> <p>CRF # _____</p> <p>Community Approval _____ Date _____</p> <p>Financial Approval <u>RC/VJ</u> Date <u>6/24/04</u></p>	
<p><i>BU# 1238</i>  <i>6/23/04</i>  <i>DORA</i>  <i>These were both compliance issues</i>  <i>Robert Munro</i></p>	
<p><b>TOTAL DUE THIS INVOICE</b> \$2175.00</p>	

POSTED

THANK YOU FOR YOUR BUSINESS

1238-04-05 CAPX

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number: Palm Valley #1238

Is the project budgeted?: Yes  No  Budgeted Amount \$: \_\_\_\_\_

General Ledger Account #: ~~\_\_\_\_\_~~ 1165

Project Number From Budget: 1238-04-U

Preferred Vendor Name: Waynes Diversified

Street Address: PO Box 5477

City, State and Zip: Deltona, FL 32728

Phone and Fax: \_\_\_\_\_

Description of Activity or Item: New Compressor or hydro tank  
& new blower on surge tank

List Bidder's Names and Bid Amounts:	(Cost of Bid)	\$
1.	<u>2175.</u>	_____
2.	<u>1630.</u>	_____
3.	<u>\$3,805.</u>	_____

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: \_\_\_\_\_

Regional Manager Signature (for Family): DC 7/2/04

Division Vice Pres. Signature and Date: \_\_\_\_\_

Group President Signature and Date\*: r. n. n. 7-2-04

\*V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached  
 Project Approval Only -- Work is not Done

Purchase Order Number 1238-04-51  
If this is an unbudgeted capex END

Forms to submit to receive Purchase Order:  
(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

- Copy of Vendor's License
- Copy of Vendor's Proof of Insurance with Additional Insured Information
- Copy of Proof of Vendor's Workers Compensation Insurance
- Copies of all Permits Required to Complete Work (Check here if none required )
- Other Forms or Attachments

OR:

1<sup>st</sup> Vendor ID# 24601

2<sup>nd</sup> Vendor ID# \_\_\_\_\_

3<sup>rd</sup> Vendor ID# \_\_\_\_\_

4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

- Signed and Notarized Lien Waiver (notarized if required by state law)
- Lien waiver not required
- Original Invoice with completed Hometown payment stamps (include PO No. on invoice)
- Approved Change Order(s), if applicable

7/7/04

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	112004-164	11/20/2004	REPLACE 2 BLOWER/MOTOR	20,200.00		20,200.00
Payor: Hometown America, LLC Payee: WAYNE'S DIVERSIFIED SERVICES 24601				Date	Check No.	Check Amount	
				12/14/2004	95854	\$****20,200.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 12/14/2004      Check No.: 00095854      Check Amount: \$\*\*\*\*20,200.00

TWENTY THOUSAND TWO HUNDRED AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_  
 \_\_\_\_\_





# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number:

Palm Valley # 1238

Is the project budgeted?:

Yes  No  Budgeted Amount \$: \_\_\_\_\_

General Ledger Account #:

1132

Project Number From Budget:

1238-04-11

Preferred Vendor Name:

Wayne's Signified

Street Address:

P.O. Box 5177

City, State and Zip

Deerbon, Fl. 32228

Phone and Fax:

Description of Activity or Item:

Blower notes/mandate

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 20,200.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: \_\_\_\_\_

Regional Manager Signature (for Family):



Division Vice Pres. Signature and Date: \_\_\_\_\_

Group President Signature and Date\*:

[Signature] 12/16/04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached

Project Approval Only - Work is not Done

Purchase Order Number 1238-04-54  
If this is an unbudgeted capex \$18 12/10/04

### Forms to submit to receive Purchase Order:

(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

- Copy of Vendor's License
- Copy of Vendor's Proof of Insurance with Additional Insured Information
- Copy of Proof of Vendor's Workers Compensation Insurance
- Copies of all Permits Required to Complete Work (Check here if none required )
- Other Forms or Attachments

OR:

- 1<sup>st</sup> Vendor ID# 24601
- 2<sup>nd</sup> Vendor ID# \_\_\_\_\_
- 3<sup>rd</sup> Vendor ID# \_\_\_\_\_
- 4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

- Signed and Notarized Lien Waiver (notarized if required by state law)
- Lien waiver not required
- Original Invoice with completed Hometown payment stamps (include PO No. on invoice)
- Approved Change Order(s), if applicable

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	100404-146	10/4/2004	INSTALL WELL METER	57,000.00		57,000.00
Payor: <b>Hometown America, LLC</b> Payee: <b>WAYNE'S DIVERSIFIED SERVICES</b> 24601				Date 11/9/2004	Check No. 90165	Check Amount \$****57,000.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 11/9/2004      Check No.: 00090165      Check Amount: \$\*\*\*\*57,000.00

FIFTY SEVEN THOUSAND AND 00/100\*\*\*\*\*

Pay to the order of:

**WAYNE'S DIVERSIFIED SERVICES**  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_  
 \_\_\_\_\_

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #100404-146

Billed to: Palm Valley	Invoice Date: Oct. 04, 2004
	Project Name: <u>Water meters</u>
	Location: <u>Oviedo, Fl.</u>
	Date of Service:

Furnish and install well meters as directed by engineer each well.

\$57,000.00

bu # <u>1238</u>	Supplier # <u>24601</u>
CapEx PO # <u>1238-04-U</u>	
Invoice # <u>100404-146</u>	
GL Acct. # <u>1132</u>	Description
	Amt
	<u>57,000.</u>
	Total
Manager Approval	Date
Additional Approval <u>DC/vj</u>	Date <u>10/29/04</u>

**POSTED**

*BU# 1238  
 10/6/04  
 Robert Munro*

TOTAL DUE THIS INVOICE

\$57,000.00

THANK YOU FOR YOUR BUSINESS

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number:

Palm Valley #1238

Is the project budgeted?:

Yes  No  Budgeted Amount \$: \_\_\_\_\_

General Ledger Account #:

1132c

Project Number From Budget:

1238-04-U

Preferred Vendor Name:

Waynes Diversified

Street Address:

P.O. Box 5177

City, State and Zip

Deltona, FL 32728

Phone and Fax:

Description of Activity or Item:

Mandate

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 57,000.-

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: \_\_\_\_\_

Regional Manager Signature (for Family): \_\_\_\_\_

Division Vice Pres. Signature and Date: DC [Signature] 10/29/04

Group President Signature and Date\*: [Signature] 10/29/04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached  
 Project Approval Only - Work is not Done

Purchase Order Number 1238-04-U  
If this is an unbudgeted capex 12380452

Forms to submit to receive Purchase Order: HB 1105104

(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

- Copy of Vendor's License
- Copy of Vendor's Proof of Insurance with Additional Insured Information
- Copy of Proof of Vendor's Workers Compensation Insurance
- Copies of all Permits Required to Complete Work (Check here if none required )
- Other Forms or Attachments

OR:  
1<sup>st</sup> Vendor ID# 24601  
2<sup>nd</sup> Vendor ID# \_\_\_\_\_  
3<sup>rd</sup> Vendor ID# \_\_\_\_\_  
4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and invoice are attached.)

- Signed and Notarized Lien Waiver (notarized if required by state law)
- Lien waiver not required
- Original Invoice with completed Hometown payment stamps (include PO No. on invoice)
- Approved Change Order(s), if applicable

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	100404140	10/4/2004	EFFLUENT POND	207,500.00		207,500.00
Payor: Hometown America, LLC Payee: WAYNE'S DIVERSIFIED SERVICES 24601				Date 10/19/2004	Check No. 86521	Check Amount \$***207,500.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 10/19/2004  
 Check No.: 00086521  
 Check Amount: \$\*\*\*207,500.00

TWO HUNDRED SEVEN THOUSAND FIVE HUNDRED AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_  
 \_\_\_\_\_

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #100404-140

Billed to: Palm Valley	Invoice Date: Oct. 04, 2004
	Project Name: Effluent pond
	Location: Oviedo, Fl.
	Date of Service:

Construct new lined effluent pond as directed by engineers drawings (phase one)

\$207,500.00

**POSTED**

BU # 1238-04-07

10/6/04

Robert [Signature]

BU # 1238	Supplier # 24601
CapEx PO # 1238-04-07	
Invoice # 100404-140	
GL Acct. # 1132	Description
	Amt
	207,500.
	Total
Manager Approval	Date
Additional Approval [Signature]	Date 10/12/04

TOTAL DUE THIS INVOICE

\$207,500.00

THANK YOU FOR YOUR BUSINESS

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number:

Palm Valley Utility #1238

Is the project budgeted?:

Yes  No  Budgeted Amount \$: 215,000.

General Ledger Account #:

1132

Project Number From Budget:

1238-04-07

Preferred Vendor Name:

Wayne's Diversified

Street Address:

P.O. Box 5777

City, State and Zip

Deltona, FL 32728

Phone and Fax:

Description of Activity or Item:

Effluent Pond

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 207,500.

1.

2.

3.

Comments on Bids:

Property Manager Signature and Date:

Regional Manager Signature (for Family):

DC 10/14/04

Division Vice Pres. Signature and Date:

Group President Signature and Date\*:

A.M. Mani 10/13/04

V.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached

Project Approval Only - Work is not Done

Purchase Order Number

If this is an unbudgeted capex QIB 10/18/04

Forms to submit to receive Purchase Order:

(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

- Copy of Vendor's License
- Copy of Vendor's Proof of Insurance with Additional Insured Information
- Copy of Proof of Vendor's Workers Compensation Insurance
- Copies of all Permits Required to Complete Work (Check here if none required )
- Other Forms or Attachments

OR:

- 1<sup>st</sup> Vendor ID# 24601
- 2<sup>nd</sup> Vendor ID# \_\_\_\_\_
- 3<sup>rd</sup> Vendor ID# \_\_\_\_\_
- 4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

- Signed and Notarized Lien Waiver (notarized if required by state law)
- Lien waiver not required
- Original Invoice with completed Hometown payment stamps (include PO No. on invoice)
- Approved Change Order(s), if applicable

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1238	Palm Valley Utility	081004-106	8/10/2004	REPLACED COMPRESSOR	730.00		730.00
Payor: Hometown America, LLC Payee: WAYNE'S DIVERSIFIED SERVICES 24601				Date 9/2/2004	Check No. 79406	Check Amount \$*****730.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 9/2/2004      Check No.: 00079406      Check Amount: \$\*\*\*\*\*730.00

SEVEN HUNDRED THIRTY AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_

\_\_\_\_\_



# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #081004-106

Billed to: Palm Valley	Invoice Date: Aug. 10, 2004
	Project Name: Decortive pond
	Location: Oviedo, Fl.
	Date of Service:

Replaced burned up compressor on aeration system

\$730.00

**POSTED**

*JMV*

*1238-04-07*

*BU#1238*

*water plant permit issue*

*8/12/04*

*Robert Munro*

CP Limited Partnership  
 Date Received by A/P \_\_\_\_\_

Ven # 24601 Dev 1238

Acct # 1132 \$ 730.

Acct # - \$ \_\_\_\_\_

Acct # - \$ \_\_\_\_\_

Desc 1238-04-07

CRF # \_\_\_\_\_

Contract Approval \_\_\_\_\_ Date \_\_\_\_\_

Regional Approval *RC/VJ* Date *8/27/04*

TOTAL DUE THIS INVOICE \$730.00

THANK YOU FOR YOUR BUSINESS

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number:

Palm Valley # 1238

Is the project budgeted?:

Yes  No  Budgeted Amount \$: 215,000.

General Ledger Account #:

1132

Project Number From Budget:

123804-07

Preferred Vendor Name:

Wayne's Diversified

Street Address:

P.O. Box 5777

City, State and Zip

Deltona, FL 32728

Phone and Fax:

Description of Activity or Item:

airation systems replace compressor +

List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 730.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: \_\_\_\_\_

Regional Manager Signature (for Family): DC 8/27/09

Division Vice Pres. Signature and Date: \_\_\_\_\_

Group President Signature and Date\*: On file w/ previous request

V.P. signature required for all capex. Group President signature required for capex unbudgeted/over budget or in excess of \$10,000

Pay from Original Invoices Attached  
 Project Approval Only – Work is not Done

Purchase Order Number \_\_\_\_\_  
If this is an unbudgeted capex AB 08/21/09

Forms to submit to receive Purchase Order:  
(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).

- Copy of Vendor's License
- Copy of Vendor's Proof of Insurance with Additional Insured Information
- Copy of Proof of Vendor's Workers Compensation Insurance
- Copies of all Permits Required to Complete Work (Check here if none required \_\_\_\_\_)
- Other Forms or Attachments

OR:

1<sup>st</sup> Vendor ID# 24601

2<sup>nd</sup> Vendor ID# \_\_\_\_\_

3<sup>rd</sup> Vendor ID# \_\_\_\_\_

4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)

- Signed and Notarized Lien Waiver (notarized if required by state law)
- Lien waiver not required
- Original Invoice with completed Hometown payment stamps (include PO No. on invoice)
- Approved Change Order(s), if applicable

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
1203	Palm Valley Utility	081004-105	8/10/2004	REMOVED PUMPS	4,775.00		4,775.00
Payor: <b>Hometown America, LLC</b> Payee: <b>WAYNE'S DIVERSIFIED SERVICES</b> 24601				Date 9/2/2004	Check No. 79407	Check Amount \$*****4,775.00	

**Hometown America, LLC**  
 150 N. Wacker Drive, Ste 2800  
 Chicago, IL 60606-4102

Bank Of America  
 Chicago, IL 60634

2-3  
 710 IL

**COPY**

Date: 9/2/2004      Check No.: 00079407      Check Amount: \$\*\*\*\*\*4,775.00

FOUR THOUSAND SEVEN HUNDRED SEVENTY FIVE AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
 PO BOX 5177  
 DELTONA FL 32728

\_\_\_\_\_

\_\_\_\_\_

# AYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
 Deltona, FL 32728

(407) 330-7597      Inv. #081004-105

Billed to: <u>Palm Valley</u>	Invoice Date: <u>Aug. 10, 2004</u>
	Project Name: <u>Irrigation pumps</u>
	Location: <u>Oviedo, FL</u>
	Date of Service:

Removed existing pumps from clear well tank and installed new pumps. Existing pumps were burned up internally

\$4775.00

*OLD 1238-04-07*  
*BU# 1238*  
*8/12/04*  
*Robert Munro*  
*Reuse irr. pumps.*

**POSTED**

**CP Limited Partnership**  
 Date Received by A/P \_\_\_\_\_  
 Ven # 24601      Dev 1238  
 Acct # - 1132      \$ 4775.00  
 Acct # \_\_\_\_\_ \$ \_\_\_\_\_  
 Acct # -      \$ \_\_\_\_\_  
 Desc 1238-04-07  
 CRP# \_\_\_\_\_  
 Community Approval \_\_\_\_\_ Date \_\_\_\_\_  
 Regional Approval DC/NG Date 8/27/04  
 Date Processed \_\_\_\_\_

**TOTAL DUE THIS INVOICE**

**\$4775.00**

**THANK YOU FOR YOUR BUSINESS**

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number: Palm Valley # 1238  
Is the project budgeted?: Yes  No  Budgeted Amount \$: 215,000.  
General Ledger Account #: 1132  
Project Number From Budget: 123804-07  
Preferred Vendor Name: Wayne's Diversified  
Street Address: P.O. Box 5777  
City, State and Zip: Deltona, FL 32728  
Phone and Fax: \_\_\_\_\_  
Description of Activity or Item: replace new pumps  
List Bidder's Names and Bid Amounts: (Cost of Bid) \$ 4775.

1 \_\_\_\_\_  
2 \_\_\_\_\_  
3 \_\_\_\_\_

Comments on Bids: \_\_\_\_\_

Property Manager Signature and Date: \_\_\_\_\_

Regional Manager Signature (for Family): DC 8/27/04  
Division Vice Pres. Signature and Date: \_\_\_\_\_

Group President Signature and Date\*: on file w/ previous request  
V.P. signature required for all capex. Group President signature required for capex unbudgeted over budget or in excess of \$10,000

Pay from Original Invoices Attached  
 Project Approval Only – Work is not Done

Purchase Order Number \_\_\_\_\_  
If this is an unbudgeted capex HB 08/31/04

Forms to submit to receive Purchase Order:  
(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).  
 Copy of Vendor's License  
 Copy of Vendor's Proof of Insurance with Additional Insured Information  
 Copy of Proof of Vendor's Workers Compensation Insurance  
 Copies of all Permits Required to Complete Work (Check here if none required \_\_\_\_\_)  
 Other Forms or Attachments  
OR:  
1<sup>st</sup> Vendor ID# 24601  
2<sup>nd</sup> Vendor ID# \_\_\_\_\_  
3<sup>rd</sup> Vendor ID# \_\_\_\_\_  
4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)  
 Signed and Notarized Lien Waiver (notarized if required by state law)  
 Lien waiver not required  
 Original Invoice with completed Hometown payment stamps (include PO No. on invoice)  
 Approved Change Order(s), if applicable

BU	BU DESC	INVOICE	DATE	REFERENCE	AMOUNT	DISC	NET
123E	Palm Valley Utility	081004-104	8/10/2004	REPLACED STARTER	2,134.00		2,134.00
Payor: Hometown America, LLC Payee: WAYNE'S DIVERSIFIED SERVICES 24601				Date 9/2/2004	Check No. 79408	Check Amount \$*****2,134.00	

**Hometown America, LLC**  
150 N. Wacker Drive, Ste 2800  
Chicago, IL 60606-4102

Bank Of America  
Chicago, IL 60634

2-3  
710 TL

**COPY**

Date: 9/2/2004      Check No.: 00079408      Check Amount: \$\*\*\*\*\*2,134.00

TWO THOUSAND ONE HUNDRED THIRTY FOUR AND 00/100\*\*\*\*\*

Pay to the order of:

WAYNE'S DIVERSIFIED SERVICES  
PO BOX 5177  
DELTONA FL 32728


\_\_\_\_\_

\_\_\_\_\_

# WAYNE'S DIVERSIFIED SERVICES

P.O. BOX 5177  
 Deltona, FL 32728  
 (407) 330-7597

Inv. #081004-104

Billed to: Palm Valley	Invoice Date: Aug. 10, 2004
	Project Name: Fox Row Lift Station
	Location: Oviedo, FL
	Date of Service:
Replaced 2hp pump and starter in panel	\$2134.00
	
<p> <i>CLD 1238-04-04</i>  <i>BU #1238</i>  <i>8/12/04</i>  <i>Robert Munro</i>  <i>permit issue</i> </p>	
<p> <b>CP Limited Partnership</b>                  Date Received by A/P _____                  Ven # <u>24601</u> Dev <u>1238</u>                  Acct # <u>1132</u> \$ <u>2134.</u>                  Acct # _____ \$ _____                  Acct # _____ \$ _____                  Desc _____                  CRF _____                  Cor _____ Date _____                  Reg. _____ Date <u>8/27/04</u>                  Date Processed _____             </p>	
<b>TOTAL DUE THIS INVOICE</b>	<b>\$2134.00</b>

THANK YOU FOR YOUR BUSINESS

# Hometown America Capital Expenditure Purchase Order

(A Separate Purchase order is required for each Project)

Property Name and Number:

Palyn Valley # 1238

Is the project budgeted?:

Yes  No  Budgeted Amount \$: 17,000.

General Ledger Account #:

1132

Project Number From Budget:

1238-04-04

Preferred Vendor Name:

Waynes Inverfield

Street Address:

P.O. Box 5177

City, State and Zip

Deltona, Fl. 32728

Phone and Fax:

Description of Activity or Item:

Replace pump & starter panel

List Bidder's Names and Bid Amounts: (Cost of Bid) \$

2134.

1.

2.

3.

Comments on Bids:

Property Manager Signature and Date:

Regional Manager Signature (for Family):

DC 8/27/04

Division Vice Pres. Signature and Date:

Group President Signature and Date\*:

X [Signature] 8/27/04

M.P. signature required for all capex. Group President signature required for capex unbudgeted, over budget or in excess of \$10,000

Pay from Original Invoices Attached  
 Project Approval Only - Work is not Done

Purchase Order Number \_\_\_\_\_  
If this is an unbudgeted capex UB 08/31/04

**Forms to submit to receive Purchase Order:**  
(Check all lines to verify that required forms are attached for the preferred vendor. Fax this PO form and all documents listed below to the Regional Administrator for the issuance of the Purchase Order Number).  
 Copy of Vendor's License  
 Copy of Vendor's Proof of Insurance with Additional Insured Information  
 Copy of Proof of Vendor's Workers Compensation Insurance  
 Copies of all Permits Required to Complete Work (Check here if none required \_\_\_)  
 Other Forms or Attachments  
OR:  
1<sup>st</sup> Vendor ID# 24601  
2<sup>nd</sup> Vendor ID# \_\_\_\_\_  
3<sup>rd</sup> Vendor ID# \_\_\_\_\_  
4<sup>th</sup> Vendor ID# \_\_\_\_\_

To submit the Purchase Order for payment, mail the following forms to the Regional Manager for processing:

(All Payment Requests must be accompanied by a signed, notarized Lien Waiver Form where applicable (notarization not required in all states). Please check the following lines to indicate whether Lien Waiver and Invoice are attached.)  
 Signed and Notarized Lien Waiver (notarized if required by state law)  
 Lien waiver not required  
 Original Invoice with completed Hometown payment stamps (include PO No. on invoice)  
 Approved Change Order(s), if applicable





10. Having reached a resolution of the matter the Department and the Respondent mutually agree and it is

**ORDERED:**

11. Respondent shall comply with the following corrective actions within the stated time periods:

On or before February 29, 2000, Respondent shall submit an application to the Department for a substantial modification of the current permit, along with the appropriate permit fee, to modify the plant's effluent disposal system. The modification shall address the repair of A2 cell or its elimination and the expansion of the disposal system to provide for a total permitted capacity of at least 0.126 MGD. The application shall be prepared and sealed by a professional engineer registered in the state of Florida. In the event the application is incomplete, Respondent shall submit the requested information within 30 days of receipt of a request for additional information to complete the application, unless a written justification for an extension of time is submitted and approved by the Department within that time frame. Within 270 days from the issuance of the Wastewater permit modification, Respondent shall complete the construction of the disposal system as authorized by the Wastewater permit and submit to the Department a Notification of Completion of Construction for Wastewater Facility signed and sealed by the engineer of record. If Respondent does not repair the A2 cell, then, upon submittal of Notification of Completion of Construction for Wastewater Facility, the Respondent shall abandon the A2 cell of the three-cell dripper system that was not constructed in accordance with Wastewater Permit FLA011D85-01. If the Respondent is unable or unwilling to construct a modification of the plant's disposal system as provided in this Paragraph, the Department reserves the right to seek other relief to require the Respondent to comply with its rules and permits.