ATTACHMENT A MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY ATTN: INVOICES

P. O. BOX 2369 JACKSON, MS 39225

REQUEST FOR PAYMENT

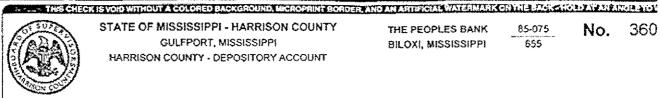
Name of Recipient Harrison Cauth Board	Grant Agreement No. Succ. 499
Address OSquASUS	Person preparing report: Lelly Girllin
Po Drawer CC	Telephone number: <u>228-214 - 1405</u>
Gulfart ms 39502	Request period: From 1117 To 43017
1. Amount of this payment request:	s <u>70,000.∞</u>
2. Total amount of grant:	s_70.000.00
3. Total prior payments approved:	\$
4. Total funds requested to date (line 1 plus line 3):	\$
5. Balance of grant funds remaining after this request	(line 2 minus line 4) \$
TO BE COMPLETED ONLY IF RECIPIENT IS PRO	OVIDING FUNDS TO THE GRANT PROJECT.
6. Total funds to be contributed by recipient:	\$
7. Amount contributed by recipient to date:	\$
8. Balance to be contributed by recipient (<i>line 6 minu</i> . I hereby certify that the amount requested is for reimber of this agreement, that request for reimbursement of the amounts requested herein do not exceed budgeted amounts.	ursement of allowable costs consistent with the terms lese costs has not previously been made, and that the
NOTE: Please attach appropriate documentation that s records for Enforcement officer, billing records, volun location of solid waste sites cleaned up.	supports this payment request (for example, payroll ne of tires disposed, volume of solid wastes disposed
Signature of Authorized Official	
Typed Name and Title of Authorized Official	
Date	

Harrison County, MS MDEQ Grant Testing 10/1/2017

		Equipment usage (2 forklifts @ 150.00 per hour) Advertising Cost (radio, TV, flyers for schools)	Volunteers	Joe Fick	Kelly Griffin	Complete Environmental & Remediation Magnolia Data Solutions County match	FY 2017	Vendor invoices	Period:	Match	Award	Program Name Pass Through
		7 hours (event 8 a.m 2 p.m.)		payroll 5/9/2017	payroll 5/9/2017	Collection Disposal & Transport Collection Disposal & Transport			6/30/2018	↔	\$ 70,000.00	Household hazardous waste collection Project - Bring It 2017 MS Department of Environmental Quality
7	Total co	Total county				125-343-581 125-343-581 Total invo	Account	G/L				
75% of costs	Total costs incurred as of 6/30/2017 \$ 113,175.42	Total county match 1/1/2017 - 6/30/2017				343-581 5/18/2017 8791 343-581 5/9/2017 41013 Total invoices paid 1/1/17 - 6/30/2017	Date	Invoice Date				
	of 6/30/2017	- 6/30/2017					III VOICE#	Invoice#				
84,881.57	\$ 113,175.42	2,100.00 10,379.57 35,325.91	21,967.40	303.41	193.76	\$ 67,997.03 9,852.48 77,849.51	Amount	Invoice				

Reimbursement request amount

\$ 70,000.00



STATE OF MISSISSIPPI - HARRISON COUNTY **GULFPORT, MISSISSIPPI** HARRISON COUNTY - DEPOSITORY ACCOUNT

THE PEOPLES BANK BILOXI, MISSISSIPPI

85-075 655

No.

360

Ref; 125-0011840

CLAIM NO: 26

DATE

AMOU

07/05/2017 \$67,99.

Sixty-Seven Thousand Nine Hundred Ninety-Seven And 03/100 Dollars

PAY TO THE ORDER OF

> COMPLETE ENVIRONMENTAL & REMEDIATION C 37 DAVID SWAN LANE **PURVIS** MS 39475-

JOHN MCADAMS, CHANCERY CLERK

#1 P 2 O 2 E O O O 1#

1:0855007521:

151=174=0#

POST OFFICE DRAWER CC GULFPORT, MS 39502

HARRISON COUNTY BOARD OF Claim Number: 26
SUPERVISORS Transaction: 11840 Date: 6/21/2017

Fund: LAW ENFORCEMENT

For:

Check Number:___

In Account With: 4729

COMPLETE ENVIRONMENTAL & REMEDIATION CO.

37 DAVID SWAN LANE

PURVIS MS 39475-

Account	Description	Invoice	Amount
125343581	TRANSPORTATION & DISPOSAL OF	8791	67,997.03
125343581	HAZARDOUS WASTE BRING IT EVENT		·

Total.... 67,997.03

11840

Hai	rrison	County,	MS

In Account With:

Complete Environmental 37 David Swan Lane Purvis, MS 39475

County Vendor#

4729

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Allowed and Ordered Paid Out

Of:

125 Law Enforcement Fund

Warrant No.

Received by John McAdams, Chancery Clerk

Gulfport, MS Date

6/19/2017

Fund/Description

Amount

Transportation and disposal of hazardous waste for the annual Bring It Event (see attached detailed invoice) Per Low Quote

\$

67,997.03

125-343-581



Invoice

DATE	INVOICE
5/18/2017	8791

BILL TO	PROJECT LOCATION
HARRISON COUNTY BEAUTIFICATION COMMISSION MS. KELLY GRIFFIN PO DRAWER CC GULFPORT, MS 39502	

P.O. NO.	TERMS	DUE DATE	DATE OF SERVICE	JOB NUMBER	MANIFEST NUMBER
	Net 30 Days	6/17/2017		1701-012	
[DESCRIPTION		QTY	RATE	AMOUNT
TRANSPORTATION AND YARD BOX	DISPOSAL OF PAIN	Γ, PER CUBIC	55	171.67	9,441.85
TRANSPORTATION AND POUND	D DISPOSAL OF AERO	OSOL CANS, PER	11,602	1.05	12,182.10
TRANSPORTATION AND		ANE	50	2.50	125.00
CYLINDERS, CAMP SIZI	DISPOSAL OF FIRE		244	1,098.00	
EXTINGUISHERS, PER F TRANSPORTATION & D		ABLE LIQUIDS,	715	0.84	600.60
PER GALLON TRANSPORTATION AND YARD BOX	O DISPOSAL OF PAIN	T, PER CUBIC	13,936	0.45	6,271.20
TRANSPORTATION AND	O DISPOSAL OF OXID	IZERS, PER	394	1.25	492.50
TRANSPORTATION & D TRANSPORTATION & D POUND		•	11,010 1,628	0.90 0.90	9,909.00 1,465.20
TRANSPORTATION & D DRY CELL BATTERIES, TRANSPORTATION ANI PER POUND	PER 55 GALLON DRU	JM	34 614 245	2.50 0.84 2.00	515.76

800-689-5656 Phone 601-794-2740 Fax 251-653-8755 Phone 251-653-6212 Fax

37 David Swan Lane Purvis, MS 39475 5826 LaRue Steiner Road Theodore, AL 36582

Total

Payment Terms are Net 30 Days
1.5% interest per month after 30 days
Service Charge of 3% will be applied to credit
card payments.
REMIT TO:

PO Box 1079 Waynesboro, MS 39367

Plea	ase pri	int or type. (Form desig			writer.)						Form A	pproved. Of	MB No. 20	050-003			
Ŷ	UNIF	FORM HAZARDOUS	1. Generator ID Ni	umber		2. Page 1 of	3. Emer	јелсу Respons	e Phone		t Tracking Num	ber					
	W.	ASTE MANIFEST	1400 × 13	KENET .			Otjours.	.H-93(n)			6042	1204	JJ	K			
	5. Ge	nerator's Name and Mailin			·	· · ·		r's Site Address	s (if different t	nan mailing addr	ess)			.=			
		MA EMARCHMENT AL SEPARES LL. MAIN HARRESON COURT.															
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		rator's Phone: 💯 🖘	1156				: 9	HEFFIF		OUD USA							
	6. Tra	ansporter 1 Company Nam			_					U.S. EPA ID							
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	7. Tra	ensporter 2 Company Nam	e					-		U.S. EPA ID	Number			12.100			
	8. De: 	signated Facility Name an	d Site Address ಟ್ಟ್	n Kandarka baren	ENTAL SERVICE	14. 14. 15 P				U.S. EPA ID Number							
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				INGCHORI, YA	24210												
	Facilit	ty's Phone: 🌃 🌣 🌣 🐧	光扬	-													
	9a.	9b. U.S. DOT Description	on (including Proper	Shipping Name, Ha	zard Class, ID Number,			10. Conta	iners	11. Total	12. Unit	40.311					
	НМ	and Packing Group (if a	ny))				Γ	No.	Туре	Quantity	Wt./Vol.	33. Was	ste Codes				
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	14. Sp	pecial Handling Instruction	s and Additional Inf	ormation			1		.f	A			· · · ·				
	F.	OR HAZARDOUS	MATERIALS	INCIDENT, C	ALL CHEMTREC	800-424-	3300 (CH701925									
		IDE DRY CHEMIC															
	i n	il Matterial is i	MONS REWOLF	HED MODSER	IOLD COLLECTER) waste	S PER.	40 CFR 25	1.4 批析以								
	15. (GENERATOR'S/OFFERO	R'S CERTIFICATIO	N: I hereby declare	that the contents of this o	onsignment :	are fully an	d accurately de	scribed above	e by the proper s	hipping name, ar	nd are classific	ed, packag	ed,			
	ſ	marked and labeled/placar Exporter, I certify that the c	ded, and are in all r	espects in proper co	ndition for transport according the terms of the attached.	ding to applic	cable interr	national and nat	ional governn	nental regulation:	s, If export shipm	ent and I am	the Primary	У			
	i	certify that the waste mini	mization statement	identified in 40 CFR	262.27(a) (if I am a large	quantity gen	erator) or (b) (if I am a sm	ell quantity ge	nerator) is true.							
	Gener	rator's/Offeror's Printed/Typ	oed Name				nature					Month	Day	Year			
1	14.	Harry L.	.	•				ering or a		-a		1	1				
7	16. Int	ternational Shipments	Import to			Export from U	3	. Port of er	trefoxit					!			
Ϊ	Trans	sporter signature (for expor	,	, 0.0.	٠ا	export none c	J.G.	- Date leav									
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<u>.</u>	18. Di:	screpancy												<u> </u>			
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≿	18b. A	Alternate Facility (or General	ator)	······································			war	nifest Reference	S INDIADEL:	U.S. EPA ID	Number						
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G		ignature of Alternate Facili	ty (or Generator)							1		Month	Day	Year			
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		esignated Facility Owner or d/Typed Name	operator, certifica	mon or receipt or naz	aruous materiais covered		rest except nature	as noted in iter	ii fod			Month	Day	Year			
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T.	HINIE	ORM HAZARDOUS	1. Generator ID Nu	umber	2.	. Page 1 of	3. Emerge	ncy Respons	e Phone	4. Manifest					
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	Gene	rator's Phone: The Company Name	1.1.751							U.S. EPA ID Number					
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	7. Tra	nsporter 2 Company Nami	8							U.S. EPA ID N	lumber				
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	8. De	signated Facility Name and	d Site Address 📈	a conference	ENTAL GERMOET	SHO				U.S. EPA ID N		STEEDING BY 1999	, e.		
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	Facili	y's Phone: 276-626-6	0.50							[
	9a.	9b. U.S. DOT Description	on (including Proper	r Shipping Name, Ha	zard Class, ID Number,			10. Conta	iners	11 Total	11. Total 12. Unit				
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					ondition for transport accord the terms of the attached E				tional governi	mental regulations.	If export sh	ipment and I am	the Prima	iry .	
					: 262.27(a) (if I am a large q				iall quantity g	enerator) is true.					
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	16. In	ternational Shipments						754				<u> </u>			
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	18a. [Discrepancy Indication Spa	ce Quar	ntity	Туре			Residue		Partial Reje	ection		Full Reje	ction	
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18b. Alternate Facility (or Generator)										U.S. EPA ID N	umber				
18b. Alternate Facility (or Generator)															
18c. Signature of Alternate Facility (or Generator)										1		Month	Day	Year	
TATE OF THE PERSON OF THE PERS															
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, a								ing systems)			,				
)ES	1.			2.		3.	-,-			4.					
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	20. D	esignated Facility Owner or	Operator: Certifica	ation of receipt of ha	zardous materials covered l	by the manifes	st excent a	s noted in He	m 18a						
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Ple	ase pr	int or type. (Form designed for use on elite (12-pitch) typewriter.)				Form A	Approved, Of	MB No. 20	050-003		
1	UNIF	FORM HAZARDOUS WASTE MANIFEST (Continuation Sheet) 21. Generator ID Number	22. Page	ì	ifest Tracking Nu						
	24. 0	enerator's Name MACENIARE PROPERTY OF SERVICES LLC MARKET				***************************************					
	25. 1	ransporter <u>1</u> Company Name 설束시작으로 EHP 등 역을 표표.	Number 5라도 구국하다								
	26. 1	ransporter Company Name	U.S. EPA ID Number								
	27a.:	27b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	28. Contai No.	ners Type	29. Total Quantity	30. Unit WL/Vol. 31. Waste Co		te Codes			
	7,7	UP1897 FLAMMAGLE LIQUET NIO SI (MIDERAL SPIRITS) GASOLDISI, 3,8 EPSM 128		\$.	715	Same Same		A Top of the second sec			
	<	UHICES, PART POLATED MATERIAL, 3, PCHI SPO# 129			13,934	<i>§</i> 1			<u></u>		
	4.	UNITED FLAMMARIE SOLICS OF GARD, NO F THETROLEUM DISTULATES MARKEMENES AT LEGIL SEGIESS				5.71					
GENERATOR	K	UPDITO, OXESTINO LIQUID, PLOIS (HYCELOGEN PERCYIDE POTASSILE PERMANGAHATE), SIL, PULLERO #140				E)					
- GEN	ď,	UMPACE CHECOMO SOLID TUOS, (CALOUM HYPOCHLOPID), POTASSUM INTRATELS LIPON, ERGINARI			394	ű.					
:	76	UNITED ORGANIC PEROXIDE (FRED. UQUIC HIETHYL ETHYL METONE PEROXIDE (1872), 5 1, P.C.II, ERC #145				ę.					
	Fh.	UNSTOR, ORGANIC PEROVIDE TYPE E. SOLID, (DIBENZON PEROVIDE (AS PASTE), 152%, 5.2, PG II, ERG #145				۶ _					
	X	UN2588 PESTICICES SOLID. TOXIC NOS 240. P/RETHINS). 5.1. POBILIDADERSAL (*/ASTE), ERGY (5)			11,010						
	K	UMBOOD, PESTICIDES, UCUMO, TOMO, MIO S. (0,4-0). GLYPHOSATE), 6 ft, PC # ERM# 161				b		:			
	K	UPGIBL MASTE COPPOSIVE LIQUID ACKIIC INORGANIC. N.O.S. (MURATIC ACID), SULFURIC ACID), 8, P.31, SRG# 151			835	\$7·					
+	F	pecial Handling Instructions and Additional Information OFF HAZAPTOCUS MATERIALS INCIDENT, CALL CHEMTREA ROO-424 SE DRY CHEMICAL FIRE EXTINGUISHERS ARSOND ALL SPILLS DI LL MATERIAL IS NOW REQULATED HOUSEHOLD COLLECTED WAS	HINEET WA	TEPIAL	幸福 快餐店						
띪		ansporter Acknowledgment of Receipt of Materials d/Typed Name Signature					Month	Day	Year		
PORT								1			
TRANSPORTER		ansporter Acknowledgment of Receipt of Materials d/Typed Name Signature					Month	Day	Year		
SILITY	35. Di	screpancy						1	<u> </u>		
DESIGNATED FACILITY	36. H	azardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and re	ecycling systems)						·		
DESIGN			<u> </u>			***************************************					

Ple	ase or	int or type. (Form designed for use on elite	(12-pitch) typewriter.)					Form A	peroved	OMB No.	2050-0039			
1	UNI	FORM HAZARDOUS WASTE MANIFEST (Continuation Sheet)	21. Generator ID Number		22. Page	i	ifest Tracking No	umber						
	24.0	Senerator's Name - State English (Industry 1974) - Ally 1979 - State English (Industry 1974)	Linte La C. Francis											
	25.	Transporter Company Name	ANDRES PROPERTY				U.S. EPAID	Number (1503 (14)			<u></u>			
	26.	Fransporter Company Name			U.S. EPA ID Number									
	27a. HM	27b. U.S. DOT Description (including Proper Sh and Packing Group (if any))	nipping Name, Hazard Class, ID N	lumber,	28. Conta	iners Type	29. Total Quantity	30. Unit	31. V	Vasta Codes				
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TRANSPORTER	- Interest	ourypeu Ivanie	e				Mor	nth Day	Year					
RANS	34. Transporter Acknowledgment of Receipt of Materials Printed/Typed Name Signature								Mor	ith Day	Year			
	35. D	iscrepancy												
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SNATE	36. H	azardous Waste Report Management Method Co	des (i.e., codes for hazardous wa	este treatment, disposal, and	f recycling systems)			1		- u	-			
DESIC				1	L									

	nt or type. (Form designed for use on elite (12-pitch) typewriter.)		l oo n	:	e La mai Les L. Ar		pproved. OMi	3 No. 205	0-0039
UNIF	FORM HAZARDOUS WASTE MANIFEST 21. Generator ID Number (Continuation Sheet)		22. Page	1	fest Tracking Nu	mper			
24. G	enerator's Name Advice END/IRSO (HAMERICAL) SERFOROSES (LLC) (MARI)								
25. 1	Fransporter 1 Company Name MALBAE은 등 X는 다른 나는 나는 19년				U.S. EPA ID H. M. GE U.S. EPA ID	0807 kb5	······································		
26. T	ransporter Company Name				U.S. EPAID	Rumper			
27a. HM	27b. U.S. DOT Description (including Proper Shipping Name. Hazard Class, ID Number, and Packing Group (if any))	28. Contai No.	ners Type	29. Total Quantity	30. Unit WL/Vol.	:31, Waste Codes			
	NON MEGULATED HONESPHOLOGICAL FOTED AND PER	7 <u>1</u>				5			,
	在1967年度可以本下的下午的名字的是一个1967年(1967年)。 2016	7 (Jak				£-,			
	UNDERSAL HOUSEHALL COLLECTED OF MEACH FLUCKESCENT BULBS FOR CS		:		245				
	UNIVERSAL HOUSEPOLOGO, LUCATED FUROSEST PER TUBES	1880				þ			
	HOM REQUIATED HOUSEHOUS COLLECTED BALLAST	~: ~:			124	₽ _	3 7		
	PION FAZARDOUS E MAINTS FOR PERMICURA (ELECTR	CHCS				ţ,		p / a v / sa a a a a a a a a a a a a a a a a a	
×	UN2709, DATTERIES, WÊT, FILLED VATH ACID S, PGILE 154 (AUTOMOTIVE)	FG #			4.	50			
	ROW REQUATED HOUSEHOLD COLLECTED LATEX PA	MT	· · · · · · · · · · · · · · · · · · ·			<u></u>			
	Crushed bulbs		7 3		3515			The same is the day of the same is the sam	
de.	Special Handling Instructions and Additional Information FOR PAZAROQUE, MATERIALS INCIPERT - ALL CHEMITRES JSE DRY CHEMICAL FIRE EXTINGUISHERS ABSORB ALL BLI MATERIAL IS NOW REGULATED HEADEROLD COLLECT	3PIU 5 O	I FERT M	ATERIAL	(J. HIRA)				
33.	TransporterAcknowledgment of Receipt of Materials ted/Typed Name	Signature					Month	Day	Year
	Transporter Acknowledgment of Receipt of Materials ted/Typed Name	Signature					Month	Day	Year
35. 35. 35. 36. 36.	Discrepancy	<u> </u>							
36.	Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment,	, disposal, and r	ecycling systems)					
3	1								



Complete Environmental & Toket Remediation Co., LLC

1025

37 David Swan Lane - Purvis, MS 38475 (601) 794-2704

Customer Date Name Date Address State ZIP Phone Job #	
Name /2/23 3 4 2 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
City State ZIP Rep Phone Job# Qby Description U TOTAL	
Qu Description U	
TOTAL SEE SA ASSESSED DETERMINE	nit Price
RECEIVED 8Y Name Date	Use Only

DELIVERED BY:

NON-HAZARDOUS 1 umber WASTE MANIFEST	2. Page 1 of	3. Emergency Respon	ise Phone	4. Waste	Tracking Nur	nber		
5. Generator's Name and Ma	į	Generator's Site Addre	see lit different ti	an mailing acid	koco)			
Generator's Phone:	•	Generally 3 One Applie	iss (ii univient li	eat maning acc	ress)			
Transporter 1 Company Name				U.S. EPA IC) Number			
7. Transporter 2 Company Name				110.504		·····		
The special company number				U.S. EPA IC) Number			
Designated Facility Name and Site Address				U.S. EPA IC	Number			
Facility's Phone:	,							
Waste Shipping Name and Description		10. Con No.	tainers Type	11. Total Quantity	12. Unit Wt./Vol.			
1.	: / - 6	<u> </u>						
3		**			TOTAL SALES			
4. 13. Special Handling Instructions and Additional Information								
6/16 C.E. 111015								
GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declar marked and labeled/placarded, and are in all respects in proper Generator's/Offeror's Printed/Typed Name	condition for transport according to applicable	e international and nati	scribed above by onal governmen	the proper shi	pping name, a			
	Signa 	iture				Month	Day '	Year
15. International Shipments Import to U.S. Transporter Signature (for exports only):	Export from U.S		ntry/exit: ving U.S.:					
	o 1986 f. is about the Found of growing and annual state the	Date lea	Ving 0.5	· · · · · · · · · · · · · · · · · · ·	- 12 2 - 1			
16: Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Transporter 2 Printed/Typed Name	, Signa	W/ Sta		Braha	i Lighten erv		<u> 1</u>	Year
17. Discrepancy	Signa	"TYNVAL	THE THE			Month	Day '	Year
17a. Discrepancy Indication Space Quantity	Туре	Residue		Partial Rej	ection	F	ıll Rejection	1
17b. Alternate Facility (or Generator)		Manifest Reference	Number;	U.S. EPA ID I	Number			
Facility's Phone: 17c. Signature of Alternate Facility (or Generator)	<u> </u>	4,		<u> </u>		Month	Day '	Year
			W - 1	1				
10 Daine 1 To 10 C	LIVAVA		111	110-		5	<u> 114</u>	A CONTRACTOR OF THE PARTY OF TH
18. Designated Facility Owner or Operator: Certification of receipt of Printed/Typed Name	materials covered by the manifest except as Signat					h.c.ash	Day	Van-
1	Signal	JAUSTA	\mathcal{J}			Month	Day \	Year

A	NON-HAZARDOUS WASTE MANIFEST	1. Generator ID Number	2.	Page t of 3. Eme	ergency Response	Phone Phone	4. Waste 1	racking Nu		509	17
	5. Generator's Name and Mailir	ng Address		Genera	ator's Site Addres	s (if dilferent ti	nan mailing addr	ess)			<u> </u>
	Generator's Phone: 6. Transporter 1 Company Nam	ne					U.S. EPA ID	Number			
	7. Transporter 2 Company Nam	ne					U.S. EPA ID	Number			
							1				
	8. Designated Facility Name an	O Sile Address					U.S. EPA ID	Number			
	Facility's Phone:				1			1		***************************************	
	9. Waste Shipping Name	e and Description			10. Conta	Type	11. Total Quantity	12. Unit Wt./Vol.			
GENERATOR .	1								er en er	:	
SENE	2.										
ĺ											
	3.										
	300000 4										
	4.	7 **				÷					
	14. GENERATOR'S/OFFEROR	'S CERTIFICATION: I hereby declare th	at the contents of this consi	gnment are fully an	id accurately desc	ribed above b	y the proper ship	oping name,	and are classified	d, package	
	Generator's/Offeror's Printed/Ty	ed, and are in all respects in proper conc ped Name	illion for transport according	to applicable interr Signature	national and natio	nal governme	ntal regulations.	·	Month	Day	Year
<u> </u>	15. International Shipments	f	ļ—— <u>1</u>								
INT	Transporter Signature (for expor	Import to U.S.	LJ Exp	ort from U.S.	Port of en Date leavi						-
TER	16. Transporter Acknowledgmer Transporter 1. Printed/Typed Nat			Signature					Month	Day	Year
TRANSPORTER	Transporter 2 Printed/Typed Nar	Smir Z		Me	South All	- 10 mg	Sample 1		15	#4g	17
TRAI	Transporter 2 Finited Typed Nar	rae		Signature		42			Month	Day	Year
A	17. Discrepancy 17a. Discrepancy Indication Spa	ice [T]									
	,	Quantity	Ш Туре	L	Residue		Partial Rej	ection		Full Rejec	tion
_	17b. Alternate Facility (or General	ator)		Mar	ifest Reference N	umber:	U.S. EPA ID	Number		····	
FACILITY	Facility's Phone:						[
	17c. Signature of Alternate Facili	ity (or Generator)	*****	l			1		Month	Day	Year
- DESIGNATED							et fatti. ia				
	18. Designated Facility Owner or	r Operator: Certification of receipt of mat-	erials covered by the manife	st except as noted	in Item 17a		a site	tylku. Di	· · · · · · · · · · · · · · · · · · ·	1.1	
V	Printed/Typed Name			Signature		:			Month	Day	Year

s check is wid without a colored background, micropaint border, and an artificial watehmark on the back - hold at an angle to STATE OF MISSISSIPPI - HARRISON COUNTY 36(THE PEOPLES BANK 85-075 No. GULFPORT, MISSISSIPPI BILOXI, MISSISSIPPI 655 HARRISON COUNTY - DEPOSITORY ACCOUNT DATE AMOL CLAIM NO: 25 Ref: 125-0011516 06/12/2017 \$9,853 Nine Thousand Eight Hundred Fifty-Two And 48/100 Dollars PAY TO THE ORDER OF MAGNOLIA DATA SOLUTIONS, LLC 160 FAIRBANKS STREET **JACKSON** MS 39202-JOHN MCADAMS, CHANCERY CLERK *:085500752: 151m174m0#

POST OFFICE DRAWER CC GULFPORT, MS 39502

HARRISON COUNTY BOARD OF Claim Number: 25
SUPERVISORS Transaction: 11516 Date: 6/ 8/2017

Fund: LAW ENFORCEMENT

For :

Check Number:

In Account With: 2916

MAGNOLIA DATA SOLUTIONS, LLC

160 FAIRBANKS STREET

JACKSON MS 39202-

Account Description Invoice Amount 125343581 ELECTRONIC WASTE PICK-UP AND 125343581 RECYCLING BRING IT 2017 41013 9,852.48

Total.... 9,852.48

HARRISON	I COUNTY, MS	Claim No.					
In Acco	ount With	Allowed and Ordered paid out					
			of				
Vendor Magno	lia Data Solutions,	<u>LLC</u>	For				
44.4			warrant#				
Vendor #		— 11516	RECEIVED by John	McAdams,	Chancery Clerk		
Fund	125		Date	***************************************	6/8/2017		
Descripti	ion .	Invoice	Account		Amount		
Electronic Waste Pick-up	and Recycling	41013	125-343-581	\$	9,852.48		
Bring It 2017 -			**				

DECEIVED JUN 0 8 2017

BOOKKEEPING

Magnolia Data Solutions, LLC

Invoice

160 Fairbanks St. Jackson, MS 39202

Phone #	Fax# .	Date	Invoice #
601-919-0062	601-510-9094	5/9/2017	41013

Bill To	
Harrison County Accounts Payable 10076 Lorraine Road Gulfport, MS 39503 Kelly Griffin	

	Job Number	P.O. No.	Rep	Terms	FOB
	61741	Bring IT - HHW	CL	Net 30	Gulfport, MS
Quantity		Description		Rate	Amogat
44,784	Electronic Waste - House I Service - No Tax	lold Haz. Collection Event		0.22 0.00%	9,852.48 g 0n
				Total	\$9,852.48

Transparent Recycling Solutions

www.MagnoliaDataSolutions.com

GLMLIQO1 REQUEST GENERAL LEDGER FILE MAINTENANCE GLWLIQ01/R4 125 343 581 OTHER CONTRACTUAL SERVICES Remaining Budget 7849.51-Item LAW ENFORCEMENT Budget 70000.00 Beginning DB HAZARDOUS COLLECT DAY SWC197 Credit Ending 77849.51 DB Debit 77849.51 Encumber Show Detail Transactions Dated __/__/ ___ thru 99 / 99 / 9999 Item Status to Display..... Blank=All P=Posted O=Open Month Receipts Disbursements Journal January February March April May 9852.48 June July 67997.03 August September October November December Total 77849.51

F1-Disbursements F2-Receipts F3-Journal F4-Requisitions F5-Orders Roll up/down THIS FUNCTION HAS NOT BEEN MADE AVAILABLE TO YOU

TIMECARDGriffin, Kelly H 5/06/2017-5/06/2017

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001/341/401/-/0/0/0	001/341/401/-/0/0/0	Account		-	Sun 5/07	Sat 5/06	Fri 5/05	Date Pay Co
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	Pay Code	
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TIMECARD

Fick, Patrick J 5/06/2017-5/06/2017

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Totals

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303.41	Wages

Schedule

Sat 5/06	Date
	Start Time
	End Time
	Pay Code Amount
	Amount

TIMECARD

Peterson, Gerald A 5/06/2017-5/06/2017

Sun 5/07	Sat 5/06	Fri 5/05	Date
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			Amount
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CompEarned	Pay Code
13:45	Amount Wages
381.77	Wages

Schedule

Sat 5/06	Date
	Start Time
	End Time
	Pay Code
	mı Pay Code Amount

2017 Bring It! Media Expenses

Community Communication - Bring it Campaign

Project 17MPC012: Media Costs - Mississippi Power

Project AE

Jennifer Boneno

Expense Detail

Description		Amount
Media Placement - THE SUN HERALD		\$2,672.77
Media Placement - WLOX		\$2,855.07
Media Placement - WLOX		\$2,855.07
	Expense Subtotal:	\$8,382.91
		\$8,382,91

BRING IT

Media Costs - Mississippi Power

Project

17MPC012: Media Costs - Mississippi Power

AE.

Denise Elser

Expense Detail

Description Media Placement - BILOXI SUN HERALD - Bring It	Amount \$1,996.66
Expense Subtotal:	\$1,996.66

\$1,996.66