

County Clerk's Office Use Only

**RECEIVED**

3 20

FRANKLIN CO. CLERK

**618582**

Claim No. \_\_\_\_\_

Vendor # 295 Check # 1570 Date Paid 2-5-2020

*Claim Date*  
1-30-2020  
*Co. Clerk*

Name HEARTLAND OFFICE SUPPLY

Address 111 LAWRENCE ST  
BENTON IL 62812

3872  
16993

VS. COUNTY OF FRANKLIN

Budget Numbers	
<u>74/433/13</u>	
<u>01/59455000</u>	

Invoice No	Invoice Date	Description	Amount Due	Amount (1)	Amount (2)	Amount (3)
0093217-001	1/23/2020	CONF TABLE OFFICE FILE ROOM	\$248.00	\$248.00		
		PUBLIC COMPUTER STATIONS FOUR (4)				
		SEE ATTACHED INVOICE				
		ACCOUNT # 514-0				
<b>TOTALS</b>			<b>\$248.00</b>			

I MARIE A TAYLOR hereby certify that the above supplies and/or services and expenses have been delivered, performed, or rendered and the charges are just and true, and that the amount claimed against Franklin County is due and unpaid after allowance of all just credits, and as substantiated by attached invoices.

Date: 1/30/2020

Approved on \_\_\_\_\_

Signature of Department Head or Designee *Marie A. Taylor* Department S/A

By: *at 920 kar KC #12 Jem RM RMD*

Comments on claim not approved

Signed \_\_\_\_\_



**Invoice**  
0093217-001

**HEARTLAND OFFICE SUPPLY**  
111 LAWRENCE STREET BENTON, ILLINOIS 62812,  
Ph: (618) 435-4264 Fax: (618) 435-4708

**Invoice Number: 0093217-001**  
Invoice Date: 01/23/20  
Customer PO:  
Account Number: 514-0  
Salesperson:

**Bill To :** SUPERVISOR ASSESSMENTS  
901 PUBLIC SQUARE  
BENTON, IL 62812

**Ship To:** 514-000  
SUPERVISOR OF ASSESSMENTS  
901 PUBLIC SQUARE  
BENTON, IL 62812

Buyer Phone: (618) 438-4331  
Fax: (618) 439-3029  
Route/Seq: /0

Line	Item Number	Description	UOM	Qty Ordered	Qty Shipped	Qty to Follow	Unit Price	Extended Total
1	LLR34340	TABLE,CONF,RECT,72",MAH	EA	1	1	0	248.00	248.00

Order Notes:

Thank you for your business!

A late fee of 1.5% will be charged on the unpaid balance of invoices not paid by the due date

Received By:

Date: 1-27-2020

<b>Subtotal</b>	<b>248.00</b>
Shipping	0.00
Sales Tax	0.00

<b>Invoice Total:</b>	<b>248.00</b>
<b>Amount Due:</b>	<b>248.00</b>
Payment Due Date:	02/22/20

*Claim Date 1-30-2020*

Carrier:

FOB Point:

Source: mainpc1

Order Taker: mainpc1