

IT IS EXPECTED THAT A QUORUM OF THE PERSONNEL COMMITTEE, BOARD OF PUBLIC WORKS, PLAN COMMISSION WILL BE ATTENDING THIS MEETING; (ALTHOUGH IT IS NOT EXPECTED THAT ANY OFFICIAL ACTION OF ANY OF THOSE BODIES WILL BE TAKEN)

CITY OF MENASHA
Administration Committee
140 Main Street, 3rd Floor Council Chambers
October 15, 2007

6:00 PM

AGENDA

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1. CALL TO ORDER

A. Call to Order

2. ROLL CALL/EXCUSED ABSENCES

A. Roll Call

3. MINUTES TO APPROVE-MINUTES & COMMUNICATIONS TO RECEIVE

Minutes to approve:

A. Administration Committee Minutes, 10/1/07

[Attachments](#)

4. DISCUSSION

A. Agreement for Administrative Services with Marshall and Ilsley Trust Company, Jan. 1, 2008 - Dec. 31, 2009, and authorize signature.

[Attachments](#)

B. State of Wisconsin Dept. of Natural Resources Asbestos Compliance Inspection Contract Agreement, July 1, 2007 - June 30, 2008, and authorize signature

[Attachments](#)

C. Joint Powers Agreement, Winnebago County 911 Emergency System, Dec. 1, 2007 - Nov. 30, 2008, and authorize signature

[Attachments](#)

D. License: "Class A" application of Kwik Trip, Inc., Michelle Wucki, Agent, for the premises at 1870 Highway 10/114, for the 2007-2008 licensing year.

[Attachments](#)

E. Approval of Declaration of Official Intent to Advance Funds, Lake Park Villas Storm Water Retention Pond.

[Attachments](#)

F. Accounts payable and payroll for 10/4/07 - 10/11/07 in the amount of \$564,264.89

[Attachments](#)

5. ADJOURNMENT

A. Adjournment

"Menasha is committed to its diverse population. Our Non-English speaking population or those with disabilities are invited to contact the Menasha City Clerk at 967-3600 24 hours in advance of the meeting so special accommodations can be made."

CITY OF MENASHA
Administration Committee
140 Main Street, 3rd Floor Council Chambers
October 1, 2007
MINUTES

I. CALL TO ORDER

A. Meeting Called to Order by Chairman Wisneski at 6:32 p.m.

II. ROLL CALL/EXCUSED ABSENCES

A. PRESENT: Pack, Hendricks, Eckstein, Michalkiewicz, Chase, Merkes, Taylor, Wisneski.
ALSO PRESENT: Mayor Laux, PC Stanke, DFC DeLeeuw, DPW Radtke, CDD Keil,
C/T Stoffel, Clerk Galeazzi, and the Press.

III. MINUTES TO APPROVE-MINUTES & COMMUNICATIONS TO RECEIVE

Minutes to approve:

A. Administration Committee Minutes, 9/17/07

Moved by Ald. Pack, seconded by Ald. Eckstein to approve minutes.
Motion carried on voice vote.

IV. DISCUSSION

A. O-28-07 An Ordinance Relating to Transitional Area Requirements

CDD Keil reported staff did extended research of other codes on transitional area requirements. They have come up with changes that will be most effective for the whole City. This will effect commercial/industrial areas that are adjacent to residential areas. The intent is to achieve a 75% screening within five years of being planted. The ordinance included specific plant types and materials that will be followed when a site plan is presented to Plan Commission.

B. Accounts payable and payroll for 9/20/07-9/27/07 for the amount of \$761,373.41.

Ck. #14117-Badger Highways-\$17,176.08 – paving of streets around Calder Stadium
Ck. #14146-Leaning Shop-\$52.50 – puzzles for Tiny Tot program.

V. ADJOURNMENT

A. Moved by Ald. Michalkiewicz, seconded by Ald. Pack to adjourn at 6:40 p.m.
Motion carried on voice vote.

Respectfully submitted by Deborah A. Galeazzi, City Clerk

AGREEMENT FOR ADMINISTRATIVE SERVICES

This agreement specifies the services to be provided to **CITY OF MENASHA** hereinafter referred to as "**Company**", in the ongoing administration of the Company's Section 125 Cafeteria Plan, and the specified responsibilities of the Company for the contract term of **January 1, 2008 - December 31, 2009**.

The Company shall be the Plan Administrator (as that term is used in the Employee Retirement and Income Security Act of 1974 as amended ("ERISA")) and Marshall & Ilsley Trust Company N.A., hereinafter referred to as the "**Administrative Firm**", shall be engaged as a subcontractor in the performance of administrative services for the Plan through the contracted year(s) specified by this agreement. Administrative Firm shall not be a fiduciary under ERISA or other applicable law, but shall be solely a ministerial agent of the Plan Administrator.

Services and materials being made available by the Administrative Firm to the Company are reflected within this "Agreement for Administrative Services". The Company shall indicate service options for the contract period and return a signed copy to the Administrative Firm in a timely manner. The Administrative Firm shall permit alternative enrollment and administrative choices listed in Schedule A of this agreement for the second plan year of the agreement provided written request is received at least three (3) months prior to start of subsequent plan year(s).

Services Provided by the Administrative Firm

- 1) Subject to interpretation by the Company as Plan Administrator, Administrative Firm will provide Section 125 Flexible Spending Account (FSA) administrative services consistent with the Company Plan Document and intended to comply with Treasury and IRS regulations for any or all of the following options: Premium Payment Plan, Health Care Flexible Spending Account Plan, Limited Health Care Flexible Spending Plan, Dependent Care Flexible Spending Account Plan and Health Care Reimbursement Plan.
- 2) Maintain a short version Summary Plan Description for the Company to distribute. (Note: only available when the Plan Document is drafted by Administrative Firm and provided the Plan Document has been reviewed by Company's legal counsel, signed and formally adopted by the Company.)
- 3) Provide Company with enrollment options and assistance with basic Cafeteria Plan questions as requested.
- 4) Provide confirmation, status change and/or termination notices verifying the participant elections.
- 5) Provide Company with electronic access to the miwebflex.com/sponsor website for participant balance information and summary report creation.
- 6) Provide participants access to account balance information via: toll-free phone, secure on-line site, and up to two participant statements per plan year.
- 7) Process participant claims in accordance with the Plan Document and IRS regulations within four (4) business days of receipt. Administrative Firm acts as "agent of the Plan administrator" when making claim determinations and will defer unusual and/or legally unclear cases to the Company for determination.
- 8) Post payroll contribution data and respective funds as soon as administratively possible within two (2) business days of receipt.
- 9) Provide check or direct deposit reimbursements five (5) days a week, Monday through Friday. If a holiday or other event impacts bank processing on a scheduled disbursement date, payment is issued the next business day. If account is not sufficiently funded the reimbursements will be delayed until funding is sufficient to process such reimbursements.
- 10) Provide money market investment for employer assets held with Administrative Firm, provided the Company signs and returns an authorization for money market investment.
- 11) Provide Company financial reports and transaction summaries in an electronic format.
- 12) Provide enrollment, election change, termination, PHI release and COBRA sample forms.
- 13) Return Company "experienced gain" funds after all pending or incomplete claims are reimbursed or expired (generally 180 days after the run-off period has ended).
- 14) Meet HIPAA privacy and security rules as a "Business Associate" of the Plan, as set forth in a separate agreement.
- 15) Provide Company employees FSA information during business hours via toll-free telephone access.
- 16) Provide Company benefits staff with basic Cafeteria Plan assistance.
- 17) Provide preparation of the Form 5500 Return for Section 125 benefits (if required) for the contract year(s) of this agreement if requested by the Company.
- 18) Provide the following non-discrimination testing (if required) up to twice per contracted Section 125 plan year if requested by the Company.
 - 25% Key Employee Concentration Test
 - Eligibility Test
 - Section 129 Dependent Care Test
 - Contributions and Benefits Test

Company Responsibilities

- 1) Review by Company's legal counsel of documents prepared by Administrative Firm prior to commencement of services and thereafter in a timely manner. Plan Documents and/or Amendments must be finalized and formally adopted prior to the effective date and in compliance with any state law or governing document applicable to the Company. If Administrative Firm agrees to offer administrative services under the Company's document, the Company is responsible for ensuring that Administrative Firm has a current copy of such document and Summary Plan Document, as well as any amendments reflecting Treasury Regulations and Administrative Firm's administration practices in a timely manner.
- 2) Provide Administrative Firm timely electronic transmission of funds and deposit reports in an approved file format.
- 3) Provide Administrative Firm necessary enrollment data consistent with Company records prior to the start of a new plan year in an approved electronic format.
- 4) Provide Administrative Firm necessary non-discrimination test data consistent with Company records in a timely fashion at the end of each contracted Plan Year and at other times during the plan year if additional testing is requested. Company remains responsible to implement corrective actions required by testing results.
- 5) Notify Administrative Firm of intent to use on-line enrollment services at least three (3) weeks prior to open enrollment. Provide eligible employees with on-line enrollment instructions. Provide Administrative Firm with electronic demographics and other data regarding eligible employees in an M&I approved format at least one (1) week prior to on-line enrollment. Compile hard copy election data and transmit to the Administrative Firm in an approved electronic format at the close of on-line enrollment if paper enrollment is used in conjunction with on-line enrollment. Close on-line enrollment at least two (2) weeks prior to the start of the new plan year. Transmit revised election data, in an approved format, during the first week of the new plan year if election changes, revocation or new elections are allowed after on-line enrollment closes. (Fee applies if on-line enrollment is extended beyond original agreed-upon time period. See Schedule A—On-line Enrollment Extension)
- 6) Company is solely responsible for determining eligibility determinations and shall provide Administrative Firm timely notice of participant coverage breaks (terminations, leaves, rehires, etc.) and mid-year election changes.
- 7) Company is solely responsible for funding benefits and shall provide Administrative Firm funds necessary to cover claim reimbursements prior to payment. Company is required to fund 5% of the annual elections at the start of the Plan Year and required to maintain an account balance equal of no less than two (2) weeks of FSA contributions. If nevertheless the account becomes overdrawn due to timing of electronic debit card transactions and/or receipt of deposits or any other cause beyond Administrative Firm's control, Company will be charged an overdraft fee of up to \$30.00 each day the account remains overdrawn. The Company understands that it shall be solely responsible for any and all overdraft charges associated with this account and no such charges shall be allocated to the account or participants in violation of any applicable federal or state laws.
- 8) Provide participants a copy of the Company's HIPAA Privacy Policy, Summary Plan Description, Health Care FSA continuation notice (COBRA), Health Care FSA Certificates of Coverage or Summary Annual Reports (SAR) to the extent required. Provide eligible employees with notice of and access to enrollment materials when first eligible and prior to each open enrollment period.
- 9) Advise the Administrative Firm of administrative and/or Plan Document changes including but not limited to: COBRA and service of process agents, eligibility, coverage periods, cost, and benefit maximums in a timely manner and prior to the effective date of any change.
- 10) Enter into a Business Associate Agreement with Administrative Firm under which the Administrative Firm is appointed Business Associate of the Plan. Company must notify Plan Administrator immediately of any change in Privacy Officer.
- 11) Notify Administrative Firm of Company's request to utilize the administrative services listed in the Fee Schedule A of this agreement in a timely manner prior to each open enrollment period.
- 12) Utilize any "experience gains" in a method that complies with applicable law. An experience gain can occur when total contributions exceed claims paid for a plan year due to participant forfeitures.
- 13) Fund account to cover any "experience loss" within ten (10) days of receipt of notice of experience loss. An experience loss can occur when total claims paid exceed contributions for the plan year due to the Uniform Coverage Rule, which requires that the maximum amount of reimbursement under a health FSA must be available at all times during the period of coverage. The risk of loss is increased if Company fails to notify Administrative firm of terminations and/or status changes in a timely manner.
- 14) Employer shall indemnify Administrative Firm and hold it harmless from and against all loss, liability, damage, expense, attorneys' fees or other obligations, resulting from, or arising out of, any act or omission of

Company in connection with the Plan and this agreement, or claim, demand, or lawsuit by Plan Participants and beneficiaries against Administrative Firm in connection with benefit payments or services performed hereunder. In addition, Company shall indemnify Administrative Firm and hold it harmless from and against any liability, expense, demand, or other obligation resulting from, or out of any premium charge, tax or similar assessment (federal or state), for which the Plan or Company is liable.

Reports and Data

Reports and data remain the property of the Company. Administrative Firm will provide the Company, upon request, all data reasonably available in electronic or printed format that is used by Administrative Firm in its administrative functions pursuant to HIPAA privacy and security rules as a "Business Associate" of the Plan, and as set forth in a separate agreement.

Fees and Terms of Payment

The Administrative Firm will submit a monthly statement showing the charges for the previous month based on selected services. The Company agrees to pay Administrative Firm the amount due within 14 days of receipt of the statement. Unpaid invoices will be settled by drawing payment from the Company's Flex Plan Account in the amount of the invoice 60 days after the invoice mailing date.

Term of this Agreement

- (a) *End of Contract Term.* This agreement will be effective from January 1, 2008 - December 31, 2009. Either party wishing to terminate this relationship at the end of the contracted term must provide a 90-day advance written notice.
- (b) *Optional.* This Agreement may be terminated as of the earliest of the following: (1) by either party upon the effective date of any legislation which makes the Plan and/or this Agreement illegal; (2) the date the Company becomes insolvent, or bankrupt, or subject to liquidation, receivership or conservatorship; (3) the termination date of the Plan, subject to any agreement between the Company and Administrative Firm regarding payment of benefits after the Plan is terminated; (4) by the Administrative Firm upon the failure of the Company to pay any charges within sixty (60) business days after they are due as provided herein; (5) by Administrative Firm upon the failure of Company to perform its obligations in accordance with this Agreement, subject to a thirty (30) day correction period following written notice of failure given by Administrative firm to Company; (6) by Company upon the failure of Administration Firm to perform its obligations in accordance with Agreement, subject to a thirty (30) day correction period following written notice of failure given by Company to Administrative Firm.
- (c) *Limited Continuation After Termination.* If the Plan is terminated, Company and Administrative Firm may mutually agree in writing that this Agreement shall continue for the purpose of payment of any Plan benefit, expense, or claims incurred prior to the date of Plan termination. In addition if this Agreement is terminated while the Plan continues in effect, Company and Administrative Firm may mutually agree in writing that this Agreement shall continue for the purpose of payment of any claims for which requests for reimbursements have been received by the Administrative Firm before the date of such termination and/or for the duration of one run-off period as described in the Plan Document, this Agreement, and attached fee schedules. If this Agreement is continued in accordance with this subsection (c), Company shall pay the monthly service charges according to the attached Fee Schedule during the period that this Agreement is so continued.
- (d) *Survival of Certain Provisions.* Termination of this Agreement shall not terminate the rights or obligations of either party arising out of a period prior to such termination. The indemnity, confidentiality, privacy and security provisions of this Agreement shall survive its termination

Date: _____

By: _____

Date: 9/21/07

By: Sheel A. Vetrone
CITY OF MENASHA
Marshall & Ilsley Trust Company, N.A.

SCHEDULE A

Fees & Enrollment Options

CITY OF MENASHA
January 1, 2008 - December 31, 2009

Document Options

A Section 125 Plan Document reflecting plan terms must be adopted prior to administration.
Plan Document to be provided and maintained by:

- Administrative Firm (fee applies and is invoiced at time of request)
 - Initial Standard Plan Document and Elective Full Restatements \$750.00**
(Not an annual fee--applies for initial drafts and elective full restatements only)
 - Future regulatory amendments and restatements are provided at no charge
 - Reflects M&I's administrative processes for premium conversion, health care FSA (HCFSA), dependent care FSA (DCFSA) and Limited FSA.
 - Includes sample short version SPD and Corporate Resolution
 - Allows for limited plan modifications
 - Basic Elective Plan Amendments \$250.00
 - Available to Companies using plan document provided by Administrative Firm to add or change standard benefit options
 - Adoption required prior to service/implementation

Benefit Options

Invoiced monthly - participant fees are charged from the month coverage begins through the end of the plan year.

Description

- Basic FSA – Limited FSA or Traditional FSA **\$4.00 / month**
 - Per participant charge includes participation in one or both spending accounts **\$260.00 /minimum**
 - Contributions made by the employer or employee (through pre-tax payroll deduction)
 - Optional 2 1/2 months grace period for HCFSA & DCFSA
 - 2 1/2 months run-off period for HCFSA & DCFSA
- Run-off Period Administration Fee..... **See the monthly price for selected benefit**
 - Charged only for non-renewing plans if services are required during the grace period (if applicable) and run-off period for contracted plan year

Enrollment Options

Invoiced at the time of request or the first month of the plan year.

Description

- On-line Enrollment..... **No Charge**
 - Forward additional confirmation notifications and modify Plan data for the upcoming plan year.
- On-line Enrollment Continuation..... **\$100.00**
 - Applies only if open enrollment continues after on-line enrollment ceases for which the Administrative Firm must forward additional confirmation notifications and modify Plan data for the new plan year.
- Educational Group Meeting..... **\$350.00 a day up to 8-hours**
 - Benefit Fair Attendance
 - One-on-one Counseling
 - Travel and lodging costs are additional

<u>PowerPoint FSA Presentation</u>	No Charge
<u>CD FSA Presentation</u>	\$5.00 / CD
<u>Customized CD FSA Presentation</u>	\$100.00 for the first CD and \$5.00 each additional CD
<u>Electronic FSA Information Booklet</u>	No Charge
- PDF version.	
- Company distributes/directs employees to electronic location	
<u>FSA Information Booklet</u>	\$30 / pack of 25 + shipping
- Hard copy version	
- Company distributes	
<u>FSA Payroll Stuffer</u>	\$10 / pack of 100 + shipping
<u>FSA Poster</u>	\$10 /pack of 10 + shipping
<u>Customized Materials</u>	Cost plus 10% + shipping

Debit Card Option

Services

-If selected, debit card services and responsibilities are set forth in a separate agreement.

Fees

One-time Set-Up Fee.....\$500.00

- Includes Bank, VISA, and co-pay system set-up

Annual per participant charge

- Issue To (select one):

Employees electing card option.....\$15.00

All Participants.....\$12.00

-Paid By (select one):

Employee (paid from HCFSA with pre-tax funds when issued)

Company (invoiced when cards are ordered)

Debit Card Replacement/Reissue.....\$5.00

- Paid By (select one):

Employee

- Fee is charged as a pre-tax claim against the employee's HCFSA if the employee will be responsible for the fee.
- Employee has the option to reorder the card

Company

Option to Change Card Art.....\$325.00

- Includes adding the Company Logo and/or changing the card design

- Actual cost is determined by extent of customization

ASBESTOS COMPLIANCE INSPECTION CONTRACT AGREEMENT

THIS CONTRACT is entered into by and between the State of Wisconsin, Department of Natural Resources (the Department) and the City of Menasha Department of Public Health (the Contractor) for the purpose of assuring compliance with ch. NR 447, Wis. Adm. Code, pertaining to asbestos compliance inspections fulfilling U.S.EPA's inspection requirements. A general description of the work includes: performing landfill, complaint, renovation, and demolition asbestos inspections. Inspections shall include the collection and submittal of samples, determinations of compliance with ch. NR 447 Wis. Adm. Code, and documentation of findings including written reports and photographs when necessary. For every one of five inspections, the Contractor shall accompany, if feasible, the waste hauler to the waste disposal site to assure compliance with transportation and waste disposal regulations. The Contractor may be called upon to provide testimony in hearings and legal proceedings when violations are discovered.

FOR AND IN CONSIDERATION of the terms and conditions contained in this contract, the above-named parties agree:

1. **PERIOD OF AGREEMENT.** This contract shall commence upon its signing by both parties and be in effect through June 30, 2008, during which period all performance as described in this contract shall be fully completed to the satisfaction of the Department. The contract may be renewed upon mutual agreement by both parties. If renewed, the contract period shall be from July 1, 2008 to June 30, 2009.
2. **CANCELLATION.** The Department reserves the right to cancel this contract in whole or in part, without penalty, due to nonappropriation of funds or for failure of the Contractor to comply with terms, conditions, or specifications of this contract. The Contractor reserves the right to cancel this contract in the event the work as described under paragraph 5 cannot be completed. Both parties agree to give a minimum of a 30 day notice for cancellation of this contract.
3. **ENTIRE CONTRACT; AMENDMENTS.** This contract shall constitute the entire agreement and previous communications or agreements pertaining to the subject matter of this contract are hereby superseded. Any contractual revisions including cost adjustments and time extensions may be made only by a written amendment to this contract, signed by both parties prior to the ending date of this contract.
4. **ASSIGNMENT.** Neither this contract nor any right or duty in whole or in part under this contract can be assigned, delegated or subcontracted by the Contractor without the prior written consent of the Department. If upon the written consent of the Department this contract or any right or duty in whole or in part is assigned, the Assignee(s) shall expressly agree to assume and perform all relevant obligations expressed under the terms of this contract and be bound by the terms and conditions of this contract, to include the terms and conditions of paragraph 7. Assignment in whole or in part of this contract does not waive the contractual rights of neither party, nor the contractual relationship between the Department and the Contractor and the Department may still seek a remedy under the contract, if applicable, pursuant to law.
5. **DESCRIPTION OF WORK OR PRODUCTS.** The Contractor and the Department agree to provide the following to the satisfaction of both parties:
 - A. The Contractor shall conduct Department compliance inspections throughout the contract period on projects the Contractor routinely inspects as part of their asbestos program. Notifications are prioritized as low, high, and top priorities. The numbers of projects of this type are expected to be 20 per contract period. No more than 4 low priority inspections shall be conducted per contract period, unless approved or directed by the DNR.
 - B. The Contractor shall have thorough knowledge of and be expected to make determinations

regarding compliance issues with specifications for asbestos abatement projects listed in ch. NR 447 Wis. Adm. Code.

- C. The Contractor shall be required to document findings in written reports using Department format and to submit such to the Department. Expert witness testimony may also be required.
- D. All contract positions shall adhere to Federal, State, and Local requirements regarding certification, health monitoring, safety precautions, and the Air Management "Asbestos Abatement/Demolition Inspection Guidelines", as provided by the Department (Attachment A).
- E. All individual(s) performing inspections and determining compliance with ch. NR 447 Wis. Adm. Code shall be certified at the Supervisor Level through the State of Wisconsin's Department of Health and Family Services. Any training necessary in this regard shall be the responsibility of the Contractor.
- F. All individual(s) performing inspections shall meet the requirements outlined in 29 CFR part 1926.1101 and 29 CFR part 1910.1001 to perform asbestos abatement inspections.
- G. The Contractor shall use as guidance the Air Management "Asbestos Abatement/Demolition Inspection Guidelines" (Attachment A).
- H. The Contractor shall supply all equipment necessary to perform asbestos compliance inspections.
- I. The Contractor shall possess a FAX machine to obtain relevant information from the Department for emergency situations.
- J. The Contractor shall perform all asbestos compliance inspections within the term of contract period.
- K. The Contractor shall allow Department personnel to accompany the representative performing inspections upon request.
- L. The Contractor shall possess a camera to document findings during asbestos compliance inspections. Film and processing are the Contractor's responsibility.
- M. Asbestos samples shall be submitted to the Wisconsin State Lab of Hygiene for analysis by polarized light microscopy. For samples less than 10% by area, additional analysis by point counting shall be performed. Sample results shall be submitted as an attachment to the asbestos compliance inspection report. Chain of custody documentation shall accompany all submitted asbestos samples.
- N. Inspection reports shall include determinations of compliance for ch. NR 447 Wis. Adm. Code.
- O. Inspection reports shall be written and submitted to the Central Office within 30 days, using Department Inspection Forms. Violations shall be verbally reported to the Department Asbestos Coordinator as soon as practical after discovery. The contractor and the Department Asbestos Coordinator shall then discuss the potential violations to determine the appropriate enforcement response. If enforcement action is taken, a secondary enforcement action request form and the needed attachments including the inspection report, sampling analysis report and photographic evidence shall be written and submitted to the department within 30 days of determining the appropriate enforcement response. If multiple inspections are warranted for a single project, only one report needs to be submitted. The initial inspection will be payable as an inspection. All follow-up inspections will be considered part of the initial inspection. If an excessive number of

follow-up inspections are required, some of those inspections may be payable as separate inspections; this determination will be made by the Department Asbestos Coordinator.

- P. Inspections shall be performed during actual abatement, prior to demolition for the presence of asbestos or during demolition, to be counted as a completed inspection. Times and dates of projects shall be supplied by the Department. All inspections shall be performed unannounced unless otherwise instructed by the contract administrator. For emergency situations, the Contractor may be requested to perform inspections within hours of notification.
 - Q. When alleged violations are discovered, at least two samples of suspected asbestos containing material shall be collected and chain of custody procedures shall be followed. Split samples should be offered upon request. Containers and chain of custody forms shall be supplied by the Department.
 - R. Photographs of the abatement site shall be taken, including areas where samples are obtained, when alleged violations are discovered.
 - S. For pre-demolition asbestos inspections where friable asbestos containing material is discovered, the Department shall be notified immediately of findings.
 - T. The Contractor reserves the right to determine the potential health risk to employees for each asbestos project and determine the risk management necessary, including the level of involvement.
6. **PAYMENT.** The Contractor, for contract activities satisfactory to the Department, shall receive compensation based on the actual number of inspections performed and reports submitted.
- A. The amount of reimbursement shall be \$10,000 per contract period, payable in quarterly amounts of \$2500. This is based on 20 inspections with their subsequent reports, at \$500 per inspection.
 - B. A reasonable amount of follow-up is included in the payment. This may include attending Department enforcement conferences, or providing expert testimony. Payment beyond this amount shall be negotiated between the Department and the Contractor.
 - C. If the Contractor cannot, at the end of the contract year, meet the inspection commitment specified in par. 6A, an alternative action in lieu of conducting an inspection may be used to meet this commitment. Such an alternative action shall involve educating the public/private sector in the areas of asbestos abatement, health risks of asbestos and/or federal and state asbestos regulations. Such action shall be approved in writing by the Department prior to its implementation. Such an alternative shall be paid at the same rate as an inspection, i.e., \$500 per alternative action.
7. **ENFORCEMENT PROCEEDINGS PARTICIPATION.** Each party recognizes that its employees, representatives or assigns may be needed to testify in enforcement proceedings initiated by the other party and related to the work described under this contract. The parties agree to such participation. Said participation would be without reimbursement for salary or expenses for the testifying party by the other party. However, if the situation is such that non-reimbursement would place an unreasonable burden on the testifying party, then the parties may enter into a separate contract or negotiated agreement for reimbursing the testifying party by the other party.
8. **RECORDS, ACCESS.** The Contractor shall, for a period of five (5) years after completion and acceptance by the Department, maintain books, records, documents and other evidence directly pertinent to performance on work under this contract in accordance with generally accepted accounting principles and practices. The Contractor shall also maintain the financial information and data used in the preparation or support of the cost submission in effect on the date of execution of this contract and a copy

of the cost summary submitted to the Department. The Department and its agents, including the U.S.EPA and duly-authorized representatives shall have access to such books, records, documents, and other evidence for the purpose of inspection, audit and copying. The Contractor shall provide proper facilities for such access and inspection. In addition, those records which relate to any dispute, appeal or litigation, or the settlement of claims arising out of such dispute, performance, or costs or items to which an audit exception has been taken, shall be maintained and made available until three years after the date of resolution of such dispute, appeal, litigation, claim or exception.

9. **CONFIDENTIALITY.** Subject to Wisconsin's Open Records Law, either party, at the request of the other party, shall take steps necessary to ensure confidentiality of records and complaints in the event that such confidentiality is necessary to guarantee un-compromised enforcement actions.
10. **INDEPENDENT CONTRACTOR.** The Department agrees that the Contractor shall have sole control of the method, hours worked, and time and manner of any performance under this contract other than as specifically provided herein. The Department reserves the right only to inspect the project site or premises for the purpose of insuring that the inspection has been completed in compliance with the contract or for routine follow-up. The Department takes no responsibility for supervision or direction of the performance of the contract to be performed by the Contractor or the Contractor's employees or agents. The Department further agrees that it shall exercise no control over the selection and dismissal of the Contractor's employees or agents.
11. **LIABILITY.** The work to be performed under this contract is to be performed entirely at Contractor's risk. Contractor hereby assumes all liability with all work and all services to be provided by the Contractor under this contract.
12. **INSURANCE RESPONSIBILITY:** The contractor performing services for the State of Wisconsin shall:
 - A. Maintain worker's compensation insurance for all employees engaged in the work.
 - B. Maintain commercial liability and property damage insurance against any claim(s), which might occur in carrying out this agreement/contract. Minimum coverage shall be one million (\$1,000,000) liability for bodily injury and property damage including products liability and completed operations. Provide motor vehicle insurance for all owned, non-owned, and hired vehicles that are used in carrying out the contract. Minimum coverage shall be one million (\$1,000,000) per occurrence combined single limit for automobile liability and property damage.
 - C. Provide an insurance certificate indicating this coverage, counter-signed by an insurer licensed to do business in Wisconsin, covering the period of the agreement/contract. The insurance certificate is required to be presented prior to issuance of the purchase order or before commencement of the contract.
 - D. The state reserves the right to require higher or lower limits where warranted.
13. **NONDISCRIMINATION.** In connection with the performance of work under this contract, the Contractor agrees not to discriminate against any employee or applicant for employment because of age, race, religion, color, handicap, sex, physical condition, developmental disability as defined in section 51.01(5), Wis. Stats., sexual orientation or national origin. This provision shall include, but not be limited to, the following: employment, upgrading, demotion or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. Except with respect to sexual orientation, the Contractor further agrees to take affirmative action to ensure equal employment opportunities. The Contractor agrees to post in conspicuous places, available for employees and applicants for employment, notices to be provided by

the Department setting forth the provisions of this nondiscrimination clause. Failure to comply with the conditions of this clause may result in the Contractor being declared an "ineligible" contractor, termination of the contract, or withholding of payment.

14. **AFFIRMATIVE ACTION.** If this contract is for an amount of twenty-five thousand dollars (\$25,000) or more the Contractor agrees to submit a written affirmative action plan to the Department within 15 business days after the contract commences if an acceptable plan is not already on file with the State of Wisconsin. (Contractors with an annual work force of fewer than twenty-five employees are exempted from this requirement.) Failure to comply with the conditions of this clause may result in the Contractor being declared an "ineligible" contractor, termination of the contract, or withholding of payment.
15. **APPLICABLE LAW.** This contract shall be governed by the laws of the State of Wisconsin. The Contractor shall at all times comply with all federal, state and local laws, ordinances and regulations in effect during the period of this contract.
16. **ANTITRUST ASSIGNMENT.** The Contractor and the Department recognize that in actual economic practice, overcharges resulting from antitrust violations are in fact usually borne by the Department. Therefore, the Contractor hereby assigns to the Department any and all claims for such overcharges as to goods, materials or services purchased in connection with this contract.
17. **PAYMENT TERMS AND INVOICING.** Payment shall be considered timely if the payment is mailed, delivered, or transferred by the later of the following:
 - A. The date specified on a properly completed invoice for the amount specified in the order or contract, or
 - B. Within thirty (30) days after receipt of a properly completed invoice or receipt and acceptance of the property or service under the order or contract or within thirty (30) days after receipt of an improperly completed invoice or receipt and acceptance of the property or service under the order or contract, whichever is later if the Department does not notify the sender of receipt of an improperly completed invoice within ten (10) working days after it receives the invoice of the reason it is improperly completed.
18. **TAXES.** The Department is required to pay the Wisconsin excise or occupation tax on its purchase of beer, liquor, wine, cigarettes, tobacco products, motor vehicle fuel and general aviation fuel. However, it is exempt from payment of Wisconsin sales or use tax on its purchases. The State of Wisconsin may be subject to other states' taxes on its purchases in that state depending on the laws of that state. Contractors performing construction activities are required to pay state use tax on the cost of materials. The State of Wisconsin has issued tax exempt number ES 40690 to the Department.
19. **TAX DELINQUENCY.** Contractors who have a delinquent Wisconsin tax liability may have their payments offset by the State of Wisconsin.
20. **ADDRESSES.** All correspondence, such as payments, shall be directed to the appropriate contact person listed below. Changes in the information listed below shall be forwarded to the other party when effective and will become part of this agreement without a formal amendment.

State of Wisconsin:
Department of Natural Resources
101 South Webster St., Box 7921
Madison, WI 53707-7921
ATTN: Amy Walden, AM/7
Phone: 608/266-3658
FAX: 608/267-0560

City of Menasha:
Health Department
140 Main St
Menasha, WI 54952
ATTN: Todd Drew, Public Health Inspector
Phone: 920/751-5119
FAX: 920/967-5273

21. **TITLES.** Paragraph headings are for ease of reference and not intended to have any meaning in themselves.

IN WITNESS WHEREOF, the parties by their signatures shall cause this contract to be executed.

Signed for and on behalf of:

STATE OF WISCONSIN
DEPARTMENT OF NATURAL RESOURCES

Date 9-27-07

By: Jane Lauderdale for Matthew Frank
Title: Secretary

Signed for and on behalf of:

CITY OF MENASHA
HEALTH DEPARTMENT

Date _____

By: _____

Title: _____

Approved as to form

JSB 10/5/07
Jeffrey S. Brandt, City Attorney

JOINT POWERS AGREEMENT WINNEBAGO COUNTY 911 EMERGENCY SYSTEM

WHEREAS, Winnebago County and the municipalities located within the boundaries of Winnebago County have implemented an Emergency 911 System for the purposes of providing emergency services to residents and visitors of these municipalities, including fire fighting, law enforcement, ambulance, medical and other emergency services; and

WHEREAS, Sec. 146.70, Wis. Stats. "Joint Powers Agreement", requires that in implementing a 911 system as has been done in Winnebago County, municipalities shall annually enter into a Joint Powers Agreement, which Agreement shall be applicable on a daily basis and which shall provide that if an emergency services vehicle is dispatched in response to a request through the Winnebago County 911 System, such vehicle shall render its services to the persons needing the services, regardless of whether the vehicle is operating outside the vehicle's normal jurisdictional boundaries.

THEREFORE, in consideration of the mutual promises, agreements, and conditions contained herein, it is hereby jointly agreed between Winnebago County and the City of Menasha, municipality", as follows:

1. That effective **December 1, 2007**, this Agreement shall, thereafter, be applicable on a daily basis from said date through **November 30, 2008**
2. That if an emergency services vehicle operated by the municipality, or operated by an agency with which the municipality contracts for that particular emergency service, is dispatched in response to a request through the Winnebago County Emergency 911 System, such vehicle (whether owned and operated by the municipality or by the agency) shall render its services to the persons needing the services, regardless of whether the vehicle is operating outside the vehicle's normal jurisdictional (or as defined by contract) boundaries.
3. That a Winnebago County Communications and Information System Advisory Committee shall be established to develop and recommend policy and procedures for emergency services communications and public safety records management issues in Winnebago County. A User's Guide that was developed in 1994 has been updated as necessary, and includes directives and guidelines for the proper use of E911 communication devices (which may include, but not be limited to, radios, computers, mobile data devices and pagers). Violation of User Guide directives could result in disciplinary action being imposed by the employing agency. The committee will be charged to effectively recommend equipment/software purchases and resource allocation with the authority to develop sub-committees as needed to accomplish that task. The committee may

develop special ad-hoc, advisory task forces to research regional communication network(s) with neighboring public safety departments or other County E911 Systems. The Advisory Committee will report to the County Executive and service that position in an advisory nature. Membership on the Advisory Committee shall consist of 9 representatives (appointed by the County Executive) from the following:

4 – Police Agency (separate departments) Representatives (normally the Police Chief or his/her designee).

4 – Fire Agency (separate departments) Representatives (normally the Fire Chief or his/her designee).

1 – Emergency Government Representative.

The Advisory Committee shall elect one Chair and Vice-Chair each year commencing in January.

4. That a copy of this Agreement shall be filed with the State Department of Justice, as required by Sec. 146.70 (9)(c), Wis. Stats.

WINNEBAGO COUNTY

By: Mark L. Harris
Winnebago County Executive
Mark L. Harris

Date: 9/25/07

By: Susan T. Ertmer
County Clerk
Susan T. Ertmer

Date: 9-25-07

CITY OF MENASHA

By: _____
Mayor

Date: _____

By: _____
City Clerk

Date: _____

ORIGINAL ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

For the license period beginning October 15 20 07 ;
ending June 30 20 08

TO THE GOVERNING BODY of the: Town of } Menasha
 Village of }
 City of }
County of Calumet Aldermanic Dist. No. _____ (if required by ordinance)

Applicant's Wisconsin Seller's Permit Number: <u>004-0000287614-01</u>	
Federal Employer Identification Number (FEIN): <u>39-1036365</u>	
LICENSE REQUESTED ▶	
TYPE	FEE
<input checked="" type="checkbox"/> Class A beer	\$
<input type="checkbox"/> Class B beer	\$
<input type="checkbox"/> Wholesale beer	\$
<input type="checkbox"/> Class C wine	\$
<input checked="" type="checkbox"/> Class A liquor	\$
<input type="checkbox"/> Class B liquor	\$
<input type="checkbox"/> Reserve Class B liquor	\$
Publication fee	\$ <u>50.00</u>
TOTAL FEE	\$

1. The named INDIVIDUAL PARTNERSHIP LIMITED LIABILITY COMPANY
 CORPORATION/NONPROFIT ORGANIZATION

hereby makes application for the alcohol beverage license(s) checked above.

2. Name (individual/partners give last name, first, middle; corporations/limited liability companies give registered name): ▶
Kwik Trip, Inc., 1626 Oak St., P.O. Box 2107, La Crosse, WI 54602-2107

An "Auxiliary Questionnaire," Form AT-103, must be completed and attached to this application by each individual applicant, by each member of a partnership, and by each officer, director and agent of a corporation or nonprofit organization, and by each member/manager and agent of a limited liability company. List the name, title, and place of residence of each person.

	Title	Name	Home Address	Post Office & Zip Code
President/Member	<u>President</u>	<u>Donald P. Zietlow</u>	<u>2802 Bergamot Pl., Onalaska, WI 54650</u>	
Vice President/Member				
Secretary/Member	<u>Secretary</u>	<u>Steven D. Zietlow</u>	<u>N2448 Three Town Rd., La Crosse, WI 54601</u>	
Treasurer/Member				
Agent ▶	<u>Store Leader</u>	<u>Michelle M. Wucki</u>	<u>W4753 Center Valley Rd., Black Creek, WI 54106</u>	
Directors/Managers	<u>Donald P. Zietlow and Steven D. Zietlow</u>			

3. Trade Name ▶ Kwik Trip #743 Business Phone Number (920) 830-0464
4. Address of Premises ▶ 1870 Highway 10 and 114 Post Office & Zip Code ▶ Menasha 54952

5. Is individual, partners or agent of corporation/limited liability company subject to completion of the responsible beverage server training course for this license period? Yes No
6. Is the applicant an employe or agent of, or acting on behalf of anyone except the named applicant? Yes No
7. Does any other alcohol beverage retail licensee or wholesale permittee have any interest in or control of this business? Yes No
8. (a) Corporate/limited liability company applicants only: Insert state Wisconsin and date 10/7/64 of registration.
(b) Is applicant corporation/limited liability company a subsidiary of any other corporation or limited liability company? Yes No
(c) Does the corporation, or any officer, director, stockholder or agent or limited liability company, or any member/manager or agent hold any interest in any other alcohol beverage license or permit in Wisconsin? Please see enclosed list. Yes No

(NOTE: All applicants explain fully on reverse side of this form every YES answer in sections 5, 6, 7 and 8 above.)

9. Premises description: Describe building or buildings where alcohol beverages are to be sold and stored. The applicant must include all rooms including living quarters, if used, for the sales, service, and/or storage of alcohol beverages and records. (Alcohol beverages may be sold and stored only on the premises described.) One-story frame construction with storage in coolers & back room.

10. Legal description (omit if street address is given above): _____
11. (a) Was this premises licensed for the sale of liquor or beer during the past license year? Yes No
(b) If yes, under what name was license issued? LJL Holdings dba Menasha Shell
12. Does the applicant understand they must file a Special Occupational Tax return (TTB form 5630.5) before beginning business? [phone 1-800-937-8864] Yes No
13. Does the applicant understand a Wisconsin Seller's Permit must be applied for and issued in the same name as that shown in Section 2, above? [phone (608) 266-2776] Yes No
14. Is the applicant indebted to any wholesaler beyond 15 days for beer or 30 days for liquor? Yes No

READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the signers. Signers agree to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, will not be assigned to another. (Individual applicants and each member of a partnership applicant must sign; corporate officer(s), members/managers of Limited Liability Companies must sign.) Any lack of access to any portion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license.

SUBSCRIBED AND SWORN TO BEFORE ME
this 3rd day of August, 20 07
Deanna Hager
(Clerk/Notary Public)
My commission expires 2-14-10

[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner/Individual)
[Signature]
(Officer of Corporation/Member/Manager of Limited Liability Company /Partner)
(Additional Partner(s)/Member/Manager of Limited Liability Company if Any)

TO BE COMPLETED BY CLERK			
Date received and filed with municipal clerk <u>8/27/07</u>	Date reported to council/board	Date provisional license issued	Signature of Clerk / Deputy Clerk
Date license granted	Date license issued	License number issued	

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

INDIVIDUAL'S FULL NAME (Please Print) (Last Name) Zietlow		(First Name) Donald	(Middle Name) Paul	SOCIAL SECURITY NUMBER [REDACTED]	
HOME ADDRESS (Street/Road) 2802 Bergamot Pl.			POST OFFICE Onalaska	STATE WI	ZIP CODE 54650
HOME PHONE NUMBER 608-779-0469		AGE [REDACTED]	DATE OF BIRTH [REDACTED]	PLACE OF BIRTH [REDACTED]	

The above named individual provides the following information as a person who is (check one):

- Applying for an alcohol beverage license as an individual.
- A member of a partnership which is making application for an alcohol beverage license.
- President of Kwik Trip, Inc.
(Officer/Director/Member/Manager/Agent) (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORGANIZATION)
 which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? 72 Years
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any municipality? Yes No
 (If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending.) (If more room is needed, continue on reverse side of this form.)
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any municipality? Yes No
 (If yes, describe status of charges pending.)
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
 (If yes, identify.) _____
(NAME, LOCATION AND TYPE OF LICENSE/PERMIT)
- Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery permit or wholesale liquor permit in the State of Wisconsin? Yes No
 (If yes, identify.) _____
(NAME OF WHOLESALE LICENSEE OR PERMITTEE) (ADDRESS BY CITY AND COUNTY)
- Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	From	Employed To
<u>Kwik Trip, Inc.,</u>	<u>1626 Oak St., La Crosse, WI 54603</u>	<u>9/1/89</u>	<u>Present</u>
<u>Gateway Foods</u>	<u>La Crosse, WI</u>	<u>1963</u>	<u>1989</u>

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Subscribed and sworn to before me

this 23rd day of August, 2007
[Signature]
(CLERK/NOTARY PUBLIC)

[Signature]
(SIGNATURE OF NAMED INDIVIDUAL)

My commission expires 2-14-10

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

INDIVIDUAL'S FULL NAME (Please Print) (Last Name) Zietlow		(First Name) Steven	(Middle Name) Donald	SOCIAL SECURITY NUMBER [REDACTED]	
HOME ADDRESS (Street/Route) N2448 Three Town Rd.			POST OFFICE La Crosse	STATE WI	ZIP CODE 54601
HOME PHONE NUMBER 608-787-5842		AGE [REDACTED]	DATE OF BIRTH [REDACTED]	PLACE OF BIRTH [REDACTED]	

The above named individual provides the following information as a person who is (check one):

- Applying for an alcohol beverage license as an individual.
- A member of a partnership which is making application for an alcohol beverage license.
- Secretary of Kwik Trip, Inc.
(Officer/Director/Member/Manager/Agent) (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORGANIZATION)
 which is making application for an alcohol beverage license.

The above named individual provides the following information to the licensing authority:

- How long have you continuously resided in Wisconsin prior to this date? 36 Years
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any municipality? . Yes No
 (If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending.) (If more room is needed, continue on reverse side of this form.)
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any municipality? Yes No
 (If yes, describe status of charges pending.)
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
 (If yes, identify.) _____
(NAME, LOCATION AND TYPE OF LICENSE/PERMIT)
- Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery permit or wholesale liquor permit in the State of Wisconsin? Yes No
 (If yes, identify.) _____
(NAME OF WHOLESALE LICENSEE OR PERMITTEE) (ADDRESS BY CITY AND COUNTY)
- Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	From	Employed To
<u>Kwik Trip, Inc</u>	<u>1626 Oak St., La Crosse, WI 54603</u>	<u>7/11/94</u>	<u>Present</u>
<u>NA</u>			

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Subscribed and sworn to before me

this 23rd day of August, 2007
Deanna Hefner
(CLERK/NOTARY PUBLIC)

Steven D Zietlow
(SIGNATURE OF NAMED INDIVIDUAL)

My commission expires 2-14-10

AUXILIARY QUESTIONNAIRE ALCOHOL BEVERAGE LICENSE APPLICATION

Submit to municipal clerk.

INDIVIDUAL'S FULL NAME (Please Print) (Last Name)		(First Name)	(Middle Name)	SOCIAL SECURITY NUMBER	
Wucki		Michelle	Marie	[REDACTED]	
HOME ADDRESS (Street/Route)			POST OFFICE	STATE	ZIP CODE
W4753 Center Valley Rd.			Black Creek	WI	54106
HOME PHONE NUMBER		AGE	DATE OF BIRTH	PLACE OF BIRTH	
(920) 882-3966		[REDACTED]	[REDACTED]	[REDACTED]	

The above named individual provides the following information as a person who is (check one):

- Applying for an alcohol beverage license as an **individual**.
- A member of a **partnership** which is making application for an alcohol beverage license.
- Agent** of **Kwik Trip, Inc.**
(Officer/Director/Member/Manager/Agent) (NAME OF CORPORATION, LIMITED LIABILITY COMPANY OR NONPROFIT ORGANIZATION)
 which is making application for an alcohol beverage license.

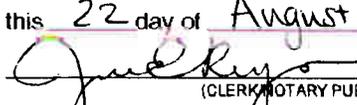
The above named individual provides the following information to the licensing authority:

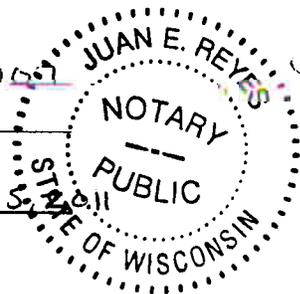
- How long have you continuously resided in Wisconsin prior to this date? All my life
- Have you ever been convicted of any offenses (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of any other states or ordinances of any municipality? Yes No
 (If yes, give law or ordinance violated, trial court, trial date and penalty imposed, and/or date, description and status of charges pending.) (If more room is needed, continue on reverse side of this form.)
- Are charges for any offenses presently pending against you (other than traffic unrelated to alcohol beverages) for violation of any federal laws, any Wisconsin laws, any laws of other states or ordinances of any municipality? Yes No
 (If yes, describe status of charges pending.)
- Do you hold, are you making application for or are you an officer, director or agent of a corporation/nonprofit organization or member/manager/agent of a limited liability company holding or applying for any other alcohol beverage license or permit? Yes No
 (If yes, identify.) Currently agent of Kwik Trip #743 located in Town of Harrison, move to new business location in Menasha pending.
(NAME, LOCATION AND TYPE OF LICENSE/PERMIT)
- Do you hold and/or are you an officer, director, stockholder, agent or employe of any person or corporation or member/manager/agent of a limited liability company holding or applying for a wholesale beer license, brewery permit or wholesale liquor permit in the State of Wisconsin? Yes No
 (If yes, identify.) _____
(NAME OF WHOLESALE LICENSEE OR PERMITTEE) (ADDRESS BY CITY AND COUNTY)
- Named individual must list in chronological order last two employers.

Employer's Name	Employer's Address	Employed From	To
Kwik Trip, Inc.,	1626 Oak St., La Crosse, WI 54603	2/16/94	Present
Norrell Temp Services	1500 Casaloma Dr., Appleton, WI	10/91	5/92
Oakridge Gardens Nursing	1700 Midway Rd., Appleton, WI	10/89	1/94

The undersigned, being first duly sworn on oath, deposes and says that he/she is the person named in the foregoing application; that the applicant has read and made a complete answer to each question, and that the answers in each instance are true and correct. The undersigned further understands that any license issued contrary to Chapter 125 of the Wisconsin Statutes shall be void, and under penalty of state law, the applicant may be prosecuted for submitting false statements and affidavits in connection with this application.

Subscribed and sworn to before me

this 22 day of August, 2007

(CLERK/NOTARY PUBLIC)




(SIGNATURE OF NAMED INDIVIDUAL)

My commission expires 2/14/2010 May 15, 2011

SCHEDULE FOR APPOINTMENT OF AGENT BY CORPORATION/NONPROFIT ORGANIZATION OR LIMITED LIABILITY COMPANY

Submit to municipal clerk.

All corporations/organizations or limited liability companies applying for a license to sell fermented malt beverages and/or intoxicating liquor must appoint an agent. The following questions must be answered by the agent. The appointment must be signed by the officer(s) of the corporation/organization or members/managers of a limited liability company and the recommendation made by the proper local official.

To the governing body of: Town/Village/City of Menasha County of Calumet

The undersigned duly authorized officer(s)/members/managers of Kwik Trip, Inc.
(registered name of corporation/organization or limited liability company)

a corporation/organization or limited liability company making application for an alcohol beverage license for a premises known as Kwik Trip #743
(trade name)

located at 1870 Highway 10 and 114, Menasha, WI 54952

appoints Michelle M. Wucki
(name of appointed agent)
W4753 Center Valley Rd., Black Creek, WI 54106
(home address of appointed agent)

to act for the corporation/organization/limited liability company with full authority and control of the premises and of all business relative to alcohol beverages conducted therein. Is applicant agent presently acting in that capacity or requesting approval for any corporation/organization/limited liability company having or applying for a beer and/or liquor license for any other location in Wisconsin?

Yes No If so, indicate the corporate name(s)/limited liability company(ies) and municipality(ies).

Agent of Kwik Trip #743 which is currently located in the Town of Harrison, move of business to a new location in the City of Menasha is in process.

Is applicant agent subject to completion of the responsible beverage server training course? Yes No

How long immediately prior to making this application has the applicant agent resided continuously in Wisconsin? All my life

Place of residence last year W4753 Center Valley Rd., Black Creek, WI

For: Kwik Trip, Inc.
By: Michelle M. Wucki Ronald P. [Signature]
And: Steven D. [Signature]
(signature of Officer/Member/Manager)

ACCEPTANCE BY AGENT

I, Michelle M. Wucki, hereby accept this appointment as agent for the corporation/organization/limited liability company and assume full responsibility for the conduct of all business relative to alcohol beverages conducted on the premises for the corporation/organization/limited liability company.

Michelle M. Wucki 8/21/2007
(signature of agent) (date)
W4753 Center Valley Rd., Black Creek, WI 54106
(home address of agent)
Agent's age [Redacted]
Date of birth [Redacted]

APPROVAL OF AGENT BY MUNICIPAL AUTHORITY (Clerk cannot sign on behalf of Municipal Official)

I hereby certify that I have checked municipal and state criminal records. To the best of my knowledge, with the available information, the character, record and reputation are satisfactory and I have no objection to the agent appointed.

Approved on August 29 by [Signature] Title Chief of Police
(date) (signature of proper local official) (town chair, village president, police chief)



Memorandum

TO: Debbie Galeazzi, City of Menasha Clerk

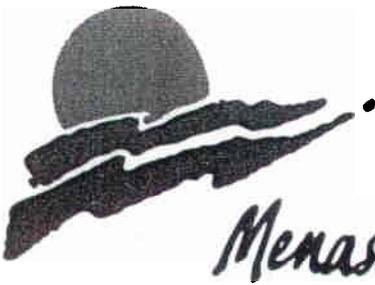
FROM: Assistant Chief/Fire Marshall Al Auxier

DATE: October 11, 2007

RE: Liquor License, Kwik Trip

I did a walk through at the Kwik Trip, 1870 Hwy 10 & 114, on October 10, 2007 and found the building in a condition that would allow me to approve the liquor license request for this occupancy.

If you have any questions or concerns please email or give me a call.



City of Menasha • Department of Community Development

To: Debbie Galeazzi
From: Building Inspection Department
Date: 10/11/07

RE: Liquor License Inspection

Address: Hyw. 10-114 Kwik Trip

The premise at the above address has been inspected for compliance with State and Local Building Codes and found to be:

COMPLIANT

NON - COMPLIANT
Recommend delaying license approval until all
Violations are corrected.

Inspected on 10/11/07 - Emergency lights to be installed.

Respectfully submitted

Dennis Jansen

City of Menasha Building Inspector

Dan Coffey

City of Menasha Building Inspector



TO: City of Menasha Common Council

FROM: Todd Drew, R.S. – Sanitarian
City of Menasha Health Dept.

DATE: October 11, 2007

RE: Liquor License Inspection, Kwik Trip

An inspection was conducted at Kwik Trip, 1870 STH 10/114 regarding a liquor license application.

The health inspection conducted in this building included standard sanitation, equipment condition, food safety, plumbing, employee hygiene, toilet and hand washing facilities, insect and rodent control and general condition using Wisconsin Administrative Code and the Wisconsin Food Code (Food Establishment Code) as a basis for inspection procedures.

The inspection conducted in this establishment did not cite any health-related violations which would necessitate a recommendation to hold this liquor license application.

If you should have any questions regarding this information, please do not hesitate to contact me.

“CLASS A” RETAIL LICENSE

No. 07-CCA4
\$ 525.00
City of Menasha
140 Main Street
Menasha, WI 54592

**COMBINATION
FORM**

**for the sale of
FERMENTED MALT BEVERAGES AND INTOXICATING LIQUORS**

WHEREAS, the local governing body of the City of Menasha, County of Winnebago, Wisconsin, has, upon application duly made, granted and authorized the issuance of a Retail Class “A” License to **LJL Station, Inc.,**

d/b/a Waverly Beach Shell, Jesse Lee Lanser/Agent to sell Fermented Malt Beverages as defined by and pursuant to Section 125.25 of the Statutes of the State of Wisconsin, and Local Ordinances and the said applicant has paid to the treasurer the sum of \$ 225.00 for such Class “A” Retailer’s Fermented Malt Beverage License as required by local ordinances,

AND WHEREAS, the local governing body has granted and authorized the issuance of a “Class A” Intoxicating Liquor License to said applicant to sell intoxicating liquor as defined in and pursuant to Section 125.51(2) of the Statutes of the State of Wisconsin and local ordinances and the said applicant has paid to the treasurer the sum of \$300.00 for such “Class A” Intoxicating Liquor License as provided by local ordinances and has complied with all the requirements necessary for obtaining such licenses, **LICENSES ARE HEREBY ISSUED** to said applicant to sell, deal and traffic in, at retail, Fermented Malt Beverages and Intoxicating Liquors at the following described premises:

Convenience Store on the premises located at W7298 Hwy 10 & 114, Menasha, WI

FOR THE PERIOD: July 1, 2007 - June 30, 2008

Given under my hand and the corporate seal of the City of Menasha, County of Winnebago, State of Wisconsin, this 22nd day of June, 2007.

Deborah A. Saluzzi

(Corporate Seal)

City Clerk

This License must be FRAMED and POSTED in a conspicuous place in the room where Fermented Malt Beverages and Intoxicating Liquors are sold or served.

DECLARATION OF OFFICIAL INTENT

This is a Declaration of Official Intent of the City of Menasha (the Issuer) to reimburse an expenditure with proceeds of a borrowing or borrowings authorized by the Issuer. This Declaration is made under and pursuant to Treas. Reg. Section 1.150-2. The undersigned has been designated as an official or employee authorized by the Issuer to make this Declaration of Official Intent pursuant to a Resolution adopted on February 20, 1995. This Declaration of Official Intent is a public record maintained in the files of the Issuer and is available for public inspection pursuant to Subchapter II of Chapter 19 of the Wisconsin Statutes.

The undersigned hereby declares that it is the reasonable expectation of the Issuer to use proceeds of a borrowing or borrowings to be incurred by the Issuer to reimburse expenditures for the property, project or program or from the fund(s) /account(s) described below:

Lake Park Villas Storm Water Retention Pond

OR

City of Menasha General Fund

The maximum principal amount of the borrowing or borrowings to be incurred to reimburse expenditures for the above-described purpose is reasonably expected on the date hereof, to be \$200,000.

The Issuer intends to reimburse itself from borrowed funds within eighteen (18) months, (three (3) years if the Issuer is a "small Issuer") after the later of (a) the date the expenditure is paid or (b) the date the facility is placed in service, but in no event more than three (3) years after the expenditure is paid.

No money from sources other than the anticipated borrowing or borrowings is, or is reasonably expected to be, reserved, allocated on a long-term basis, or otherwise set aside by the Issuer with respect to the expenditure, pursuant to the budgetary and financial circumstances of the Issuer as of the date of this Declaration.

Dated this fifteenth day of October, 2007

By: _____
Thomas R. Stoffel

Title: Comptroller/Treasurer

Each of the expenditures described must be one of the following: a capital expenditure (i.e. any cost which is properly chargeable to a capital account or would be so chargeable with a proper election), a cost of issuance for a bond, an expenditure relating to certain extraordinary working capital items, a grant, a qualified student loan, a qualified mortgage loan, or a qualified veterans' mortgage loan.

CITY OF MENASHA DISBURSEMENTS

Accounts Payable for 10/4/07-10/11/07 Checks # 14288-14445	\$ 417,110.25
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Payroll Checks for 10/4/07-10/11/07 Checks # 34866-35108	<u>147,154.64</u>
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Total	\$ 564,264.89
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**Gaps in the sequence of accounts payable check numbers may be caused by: voiding checks at the start of a new check run to set up printing of the checks correctly, having a large number of invoices on a particular vendor which causes the payment to be printed on more than one accounts payable check , incorrect alphabetizing of a vendor causing the accounts payable check to appear out of sequence or software/printer problems which result in accounts payable checks being printed incorrectly and needing to be discarded.

Menasha Employees Credit Union-Employee Deductions

Menasha Employees Local 1035-Union Dues

Menasha Employees Local 1035B-Union Dues

Wisconsin Support Collections-Child/Spousal Support

United Way-Employee Donations

AMT-Garnishments

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Vendor ID / Name	Invoice Nbr	CpnyID	Acct	Subaccount	Amount	Invoice Description
01030 AAA SANITATION INC	148157	31100	55	07-202-209	165.00	HANDICAP PORTABLE TOILETS/BOAT
	148156	31100	55	07-202-209	72.59	HANDICAP PORTABLE TOILETS/BRIG
	Check Date 10/4/2007	Check Nbr	014288		Check Total:	237.59
01054 ACCENT FLORAL & GIFTS LLC	10781/10968	31100	55	04-221-316	104.00	HUSS/LACEY SYMPATHY PLANTS
	Check Date 10/4/2007	Check Nbr	014289		Check Total:	104.00
01060 ACCURATE ALIGNMENT INC	7016037	31731	54	10-149-294	776.23	VEHICLE REPAIR
	Check Date 10/4/2007	Check Nbr	014290		Check Total:	776.23
01075 ACCURATE SUSPENSION WAREHOUSE	7016070	31731	54	10-149-300	207.32	BAND SAW BLADES/BRAKELEEN
	Check Date 10/4/2007	Check Nbr	014291		Check Total:	207.32
01200 AFFINITY EAP	100207	31100	51	02-105-337	250.00	SUPERVISOR DOT ALCOH/DRUG TRNG
	Check Date 10/4/2007	Check Nbr	014292		Check Total:	250.00
01465 ALL-SPORT TROPHY	38560	31100	55	07-201-300	197.20	GRUNSKI MEDALS
	Check Date 10/4/2007	Check Nbr	014293		Check Total:	197.20
01600 AMERICAN MILLWORK & HARDWARE	106159	31266	54	10-308-300	89.68	24" POLY HEAD RAKE
	Check Date 10/4/2007	Check Nbr	014294		Check Total:	89.68
01680 ANCHOR BANK	100107	31100	55	04-221-316	50.00	BOND 25 YR MEMBER BOB ASMUS
	Check Date 10/4/2007	Check Nbr	014295		Check Total:	50.00
01797 MARGARET ARNEMAN	100107	31100	21	04-269-000	10.00	REFUND TRIP CANCELLATION
	Check Date 10/4/2007	Check Nbr	014296		Check Total:	10.00

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02040 BADGER HIGHWAYS CO INC	137627	31100	54	10-121-300	20,988.51	PAVING PROJ/BINDER/STONE
	137679	31100	54	10-121-300	30,290.40	PAVING PROJECT BEHIND CALDER
	137723	31100	54	10-121-300	159.47	HOTMIX ASPHALT
	137735	31100	54	10-121-300	150.00	TACK COAT B
Check Date	10/4/2007	Check Nbr	014297		Check Total:	51,588.38
02050 BADGER LAB & ENGINEERING INC	INV000031275	31201	54	10-301-212	752.00	GRAPHICS PACKAGING WASTEWTRS
	INV000031276	31201	54	10-301-212	1,087.00	INTERTAPE POLYMER WASTEWATERS
	INV000031277	31201	54	10-301-212	752.00	ALCAN PACKAGING WASTEWATERS
	INV000031278	31201	54	10-301-212	752.00	GUNDERSON CLEANERS WASTEWATERS
	INV000031279	31201	54	10-301-212	752.00	WHITING PAPER WASTEWATERS
Check Date	10/4/2007	Check Nbr	014298		Check Total:	4,095.00
02335 BECK ELECTRIC INC	D283	31207	55	07-205-240	105.38	LIGHT BULBS AT MARINA
Check Date	10/4/2007	Check Nbr	014299		Check Total:	105.38
02347 MARK BECKER	092807	31100	22	04-101-000	30.00	OVERPAYMENT PAVILION RENTAL
Check Date	10/4/2007	Check Nbr	014300		Check Total:	30.00
02410 BERGSTROM	CTCB724176	31731	54	10-149-294	836.40	BODY WORK
Check Date	10/4/2007	Check Nbr	014301		Check Total:	836.40
02615 MARK BOERBOOM	070206	31100	52	08-101-338	9.67	CRT TRAINING
		31100	52	08-101-338	-9.67	VOID CHECK 8670/OVER YEAR OLD
Check Date	10/4/2007	Check Nbr	014303		Check Total:	0.00
02623 BOMSKI CONSTRUCTION &	100307	31278	53	09-116-701	5,056.00	LHR/REHAB PROGRAM
Check Date	10/4/2007	Check Nbr	014304		Check Total:	5,056.00

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02717 JEFFREY BRANDT	100107	31100	51	02-103-331	63.05	MILEAGE
	100107	31100	51	02-103-333	10.00	MEALS
	100107	31100	51	02-105-331	44.62	MILEAGE
	Check Date	10/4/2007	Check Nbr	014305	Check Total:	117.67
02730 BRAZEE ACE HARDWARE	52191	31100	55	07-202-240	9.99	WATER HEATER AT SMITH PARK
	52506	31100	55	07-202-240	6.48	SHELF BRACKETS AT SMITH PARK
	52591	31100	55	07-203-240	1.58	SCREEN FOR POOL FURNACE
	Check Date	10/4/2007	Check Nbr	014306	Check Total:	18.05
02780 BRUCE MUNICIPAL EQUIPMENT INC	5072794	31731	54	10-149-383	213.91	WASHER/PIVOT ASSEMBLY
	Check Date	10/4/2007	Check Nbr	014307	Check Total:	213.91
03090 CANTILEVER	092507	31485	56	03-202-822	322.50	NATURES WAY HOUSING DEV
	Check Date	10/4/2007	Check Nbr	014308	Check Total:	322.50
03145 CAREW CONCRETE & SUPPLY CO INC	740682	31100	54	10-134-300	74.00	BAG SLURRY
	740682	31201	54	10-301-300	74.00	BAG SLURRY
	743674	31100	54	10-134-300	72.00	CONCRETE
	Check Date	10/4/2007	Check Nbr	014309	Check Total:	220.00
03225 CB SUPPLY COMPANY INC	0133695-IN	31731	54	10-149-383	3.62	SET COLLAR
	Check Date	10/4/2007	Check Nbr	014310	Check Total:	3.62
03585 COMMUNITY HOUSING COORDINATOR	92	31261	56	03-207-216	5,000.00	NATURES WAY/CDBG/HOME PROJ
	Check Date	10/4/2007	Check Nbr	014311	Check Total:	5,000.00
04136 DAVIS & STANTON	13428	31100	52	08-101-315	265.25	UNIFORM COMMENDATION BARS
	Check Date	10/4/2007	Check Nbr	014312	Check Total:	265.25

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05267 EXTENDED STAY AMERICA	100307	31263	56	03-207-701	2,233.73	CDBG PROGRAM
	<u>Check Date</u> 10/4/2007	<u>Check Nbr</u>	<u>014313</u>		<u>Check Total:</u> 2,233.73	
06010 FABCO EQUIPMENT INC	C153024	31731	54	10-149-383	258.11	VALVE/TREADLE
	<u>Check Date</u> 10/4/2007	<u>Check Nbr</u>	<u>014314</u>		<u>Check Total:</u> 258.11	
06040 FAHRNER ASPHALT SEALERS INC	M0003-970136-B	31100	54	10-121-216	20,792.07	CHIP SEAL PROGRAM
	<u>Check Date</u> 10/4/2007	<u>Check Nbr</u>	<u>014315</u>		<u>Check Total:</u> 20,792.07	
07080 GANNETT WISCONSIN NEWSPAPERS	091907	31100	51	10-115-322	130.00	OSHKOSH NORTHWESTERN RENEWAL
	<u>Check Date</u> 10/4/2007	<u>Check Nbr</u>	<u>014316</u>		<u>Check Total:</u> 130.00	
07130 GE CHEMICAL	3469	31731	54	10-149-300	261.25	75-55 GAL DRUM
	<u>Check Date</u> 10/4/2007	<u>Check Nbr</u>	<u>014317</u>		<u>Check Total:</u> 261.25	
07460 GREEN BAY HIGHWAY PRODUCTS LLC	13890	31100	54	10-134-300	475.00	FABRIC FOR CATCHBASINS
	<u>Check Date</u> 10/4/2007	<u>Check Nbr</u>	<u>014318</u>		<u>Check Total:</u> 475.00	
07580 GUNDERSON UNIFORM & LINEN RENT	1219972	31100	52	08-101-313	29.95	TOWEL/MAT SERVICE
	<u>Check Date</u> 10/4/2007	<u>Check Nbr</u>	<u>014319</u>		<u>Check Total:</u> 29.95	
09290 INTERSTATE BATTERY OF GREEN BA	90040057	31731	54	10-149-383	62.95	BATTERY
	<u>Check Date</u> 10/4/2007	<u>Check Nbr</u>	<u>014320</u>		<u>Check Total:</u> 62.95	
09330 IOD INCORPORATED	0022-AG-32463	31100	52	08-101-215	19.24	THEDA CLARK RETRIEVE FEE
	022-AG-32450	31100	52	08-101-215	22.13	THEDA CLARK RETRIEVE FEE
	<u>Check Date</u> 10/4/2007	<u>Check Nbr</u>	<u>014321</u>		<u>Check Total:</u> 41.37	

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11155 KITZ & PFEIL INC	082114-0043	31100	55	07-202-240	11.60	REPAIRS IN SEVERAL BUILDINGS
	082214-0125	31100	53	09-212-240	6.45	SPRAY ENAMEL
	082314-0049	31100	55	07-202-300	31.45	TRIM LINE
	082314-0078	31100	54	10-131-300	32.06	BLADES/DISPENSERS/STAPLES
	082314-0170	31100	55	07-202-240	3.74	HART PARK FOUNTAIN
	082414-0007	31100	54	10-131-300	3.86	BLADE
	082414-0102	31100	55	07-202-300	19.96	CONCRETE/FIX SIGN AT BARKER
	082414-0103	31100	55	07-202-300	4.99	CONCRETE/BARKER SIGN REPAIR
	082714-0006	31100	53	09-212-240	1.01	EMER LIGHT CONNECTORS
	082714-0073	31100	51	10-115-300	28.18	AIR FRESHENER BATTERIES
	082914-0019	31100	52	09-307-300	11.67	SPRAY ENAMEL
	083003-0023	31731	54	10-149-383	17.29	AIR FILTER CARTRIDGE/UNDERCOAT
	083114-0059	31100	54	10-134-300	23.64	KNIFE/BLADE/CATCHBASIN FABRIC
	090414-0012	31100	55	07-202-315	10.78	SIPHON PUMP
	090509-0051	31100	55	07-202-240	17.98	GFT COVERS/VANDALISM BARKER
	090514-0037	31100	55	07-202-315	17.53	REEL/STAND/TWIND/SOCCER FIELD
	090514-0052	31100	55	07-202-240	12.87	PAINT/ISLE OF VALOR/SMITH
	090514-0052	31100	55	07-203-240	2.13	HARDWARE MISC/POOL
	090514-0116	31100	55	10-215-313	19.21	SOAP/TRASH BAGS/PAPER TOWELS
	090609-0017	31100	54	10-304-300	18.87	GARBAGE TAGS
	090614-0001	31100	55	07-202-240	31.76	PAINT SUPPLIES/MEMORIAL BLDG
	090614-0007	31100	55	07-202-240	10.76	PAINT/REPAIR MEM COLUMNS
	090709-0006	31100	55	07-202-300	3.67	MERCURY KIT
	090714-0001	31100	55	07-203-240	6.99	POOL PUMP HOSE
	090714-0012	31100	55	07-202-315	2.50	MERCURY CLEAN UP
	091003-0012	31100	55	07-202-315	22.82	SOCKETS
	091109-0008	31100	55	07-202-240	19.68	MARKING PAINT/JEFFERSON PARK
	091114-0136	31100	54	10-121-300	7.38	PROPANE FOR PAVER
	091303-0018	31100	55	07-202-315	6.72	EDGER BLADE
	091303-0011	31100	55	07-202-315	-1.46	EDGER BLADE RETURN
	091314-0088	31100	55	07-202-240	4.07	BULBS/MARKERS
	091314-0088	31100	55	07-203-240	17.85	TAPE/PAINT
	091414-0056	31100	55	07-202-240	6.74	WASHER/KOSLO

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	091714-0029	31100	55	07-202-240	9.89	REPAIRS AT KOSLO
	091714-0150	31100	55	07-202-240	22.93	ADAPTER/TUBE CUTTER
	091814-0041	31100	53	09-212-240	9.32	SENIOR CENTER SHUTTER PAINT
	091914-0004	31100	54	10-124-300	30.96	SALT SHED KEYS
	091914-0015	31731	54	10-149-300	23.94	DUCT TAPE
	091914-0075	31100	53	09-212-240	11.48	SENIOR CENTER SHUTTER PAINT
	091914-0107	31100	55	07-202-240	8.21	SPRINGS DOOR CLOSER
	092014-0088	31100	53	09-212-240	11.48	SENIOR CENTER SHUTTERS
	Check Date 10/4/2007	Check Nbr	014325		Check Total:	562.96
11165 KJ WASTE SYSTEMS INC	100107	31266	54	10-307-216	1,134.00	CORRUGATE/CO-MINGLE/CONT RENT
	Check Date 10/4/2007	Check Nbr	014326		Check Total:	1,134.00
11175 LORETTA KJEMHUS	093007	31100	53	09-102-331	11.88	MILEAGE
	093007	31100	53	09-118-331	6.84	MILEAGE
	Check Date 10/4/2007	Check Nbr	014327		Check Total:	18.72
11315 KRUEGER TRUE VALUE	860690	31100	53	07-401-315	30.13	GREASE GUN/HOSE
	Check Date 10/4/2007	Check Nbr	014328		Check Total:	30.13
12250 LAWSON PRODUCTS INC	6003108	31731	54	10-149-300	287.71	WASHERS/CABLE TIES/SAW BLADE
	6044883	31731	54	10-149-300	84.98	NUTS/WASHER/BATTERY/MISC
	Check Date 10/4/2007	Check Nbr	014329		Check Total:	372.69
12375 LEVENHAGEN CORPORATION	60993	31207	55	07-205-381	2,417.23	LEAD FREE GAS
	0029977-IN	31731	54	10-149-300	57.60	ULTRA RED
	Check Date 10/4/2007	Check Nbr	014330		Check Total:	2,474.83
13045 MANDERFIELD BAKERY	272512	31100	55	07-201-300	14.50	GRUNSKI RUNSKI PRODUCTS
	Check Date 10/4/2007	Check Nbr	014331		Check Total:	14.50

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13149 MATTHEWS COMMERCIAL TIRE CTR	022221	31731	54	10-149-382	611.40	TIRE REPAIR
	022310	31731	54	10-149-382	123.12	TIRE REPAIR
	Check Date 10/4/2007	Check Nbr	014332		Check Total:	734.52
13150 MATTHEWS TIRE & AUTO SERVICE	320871	31731	54	10-149-382	509.15	VEHICLE REPAIR
		Check Date 10/4/2007	Check Nbr	014333	Check Total:	509.15
13360 MENASHA ELECTRIC & WATER UTILI	090807	31100	54	10-143-223	14,170.13	PUBLIC STREET LIGHTING
	092607	31100	54	10-143-223	3,985.21	CORRECTED STREET LIGHT BILLING
	Check Date 10/4/2007	Check Nbr	014334		Check Total:	18,155.34
13370 MENASHA EMPLOYEES CREDIT UNION		31100	21	04-299-020	2,007.00	
		Check Date 10/4/2007	Check Nbr	014335	Check Total:	2,007.00
13375 MENASHA EMPLOYEES LOCAL 1035		31100	21	04-299-031	248.00	
		Check Date 10/4/2007	Check Nbr	014336	Check Total:	248.00
13445 MENASHA PUBLIC WORKS FACILITY	100107	31100	54	10-124-311	41.00	STAMPS
		Check Date 10/4/2007	Check Nbr	014337	Check Total:	41.00
13455 MENASHA SENIOR CENTER	092707	31100	21	04-269-000	80.00	TIP/DRIVER/DOOR CO BUS TRIP
	092707	31100	21	04-289-000	6.39	CRAFT CLASS SUPPLIES
	Check Date 10/4/2007	Check Nbr	014338		Check Total:	86.39
13460 MENASHA TREASURER	100107	31100	55	04-221-316	250.00	DOOR PRIZES 25 YEAR DINNER
		Check Date 10/4/2007	Check Nbr	014339	Check Total:	250.00
13520 BRIAN METTILLE &	091707	31263	56	03-207-701	2,527.54	CDBG PROGRAM
	091707	31263	56	03-207-701	-2,527.54	VOID/PAY TO EXTENDED STAY
	Check Date 10/4/2007	Check Nbr	014340		Check Total:	0.00

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13755 MORTON SAFETY	218132	31731	54	10-149-300	23.20	EAR PLUGS
	217631	31100	55	07-202-313	96.51	VANDALISM CLEANING SUPPLIES
	Check Date 10/4/2007	Check Nbr	014341		Check Total:	119.71
13785 MOTION INDUSTRIES INC	WI25-422035	31731	54	10-149-383	75.91	PARTS
	Check Date 10/4/2007	Check Nbr	014342		Check Total:	75.91
14010 N&M AUTO SUPPLY	186815	31731	54	10-149-383	108.40	DISK BRAKE PADS/ROTOR
	186471	31731	54	10-149-383	4.56	EXH PIPE
	187464	31731	54	10-149-383	26.10	DAYTIME RUNNING LAMP
	188327	31731	54	10-149-383	17.52	HEADLIGHT SWITCH
	188315	31731	54	10-149-383	25.12	HALOGEN CAPSULES/PLUG
	Check Date 10/4/2007	Check Nbr	014343		Check Total:	181.70
14220 NEENAH-MENASHA SEWERAGE COMM	2007-179	31201	54	10-302-250	18,789.00	NMSC BOND ISSUES/INT/DEBT
	2007-173	31201	54	10-302-250	76,994.54	WASTEWATER TREATMENT
	2007-156	31201	54	10-301-211	638.00	FOX RIVER CLEANUP
	2007-158	31201	54	10-301-211	10,008.59	FOX RIVER CLEANUP
	Check Date 10/4/2007	Check Nbr	014344		Check Total:	106,430.13
15210 ORIENTAL TRADING CO INC	618625709-01	31100	55	07-201-300	16.90	TINY TOTS SUPPLIES
	Check Date 10/4/2007	Check Nbr	014345		Check Total:	16.90
16300 PIGGLY WIGGLY #24	1425	31827	53	09-212-300	31.63	HALLOWEEN PARTY SUPPLIES
	Check Date 10/4/2007	Check Nbr	014346		Check Total:	31.63
18093 MONICA RASMUSSEN	100107	31733	51	02-116-730	275.00	CLAIM AGAINST THE CITY
	Check Date 10/4/2007	Check Nbr	014347		Check Total:	275.00

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18160 REDI-WELDING CO	13583	31100	55	07-202-240	40.00	WELD CAST IRON PUMP HANDLE
	Check Date 10/4/2007	Check Nbr	014348		Check Total:	40.00
18370 RIESTERER & SCHNELL INC	482717	31731	54	10-149-383	69.55	IGNITOR
	482836	31731	54	10-149-383	188.89	STOCK
	Check Date 10/4/2007	Check Nbr	014349		Check Total:	258.44
19285 SECURITY FENCE & SUPPLY CO INC	2007-16040-IN	31100	55	07-202-243	3.00	PLAYGROUND FIX
	Check Date 10/4/2007	Check Nbr	014350		Check Total:	3.00
19325 SERVICE MOTOR COMPANY	IV52413	31731	54	10-149-383	142.72	SHOCK
	Check Date 10/4/2007	Check Nbr	014351		Check Total:	142.72
19356 SHERWIN-WILLIAMS CO	6675-2	31100	55	07-202-240	129.80	PAINT MEMORIAL BUILDING
	Check Date 10/4/2007	Check Nbr	014352		Check Total:	129.80
19380 SHOPKO STORES INC	51511	31100	55	07-201-300	14.61	PLAYGROUND SUPPLIES
	51530	31100	55	07-201-300	35.67	PLAYGROUND SUPPLIES
	51561	31100	55	07-201-300	9.95	COACHES WHISTLES
	Check Date 10/4/2007	Check Nbr	014353		Check Total:	60.23
02430 STANLEY SECURITY SOLUTIONS INC	MN-453977	31100	55	07-202-240	90.08	DOOR KEYS
	Check Date 10/4/2007	Check Nbr	014302		Check Total:	90.08
20075 TEL/COM	10065051	31100	51	04-109-221	7.95	IS
	10065051	31100	51	10-115-221	7.95	CITY HALL
	10065051	31100	55	06-101-221	7.95	LIBRARY
	Check Date 10/4/2007	Check Nbr	014354		Check Total:	23.85

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20155 THEDACARE LABORATORIES	22464	31100	12	04-399-000	83.45	HEPATITIS B/BLOOD COLLECTION
	Check Date 10/4/2007	Check Nbr	014355		Check Total:	83.45
20385 TRI-CITY GLASS INC	101-0907-25181	31100	55	07-202-240	74.19	VANDALISM REPAIR
	Check Date 10/4/2007	Check Nbr	014356		Check Total:	74.19
21045 UNIFIRST CORPORATION	0970019561	31731	54	10-149-201	85.75	MAT/MOP/TOWEL/CLOTHING PROT
	Check Date 10/4/2007	Check Nbr	014357		Check Total:	85.75
21227 US OIL CO INC	L32160	31731	54	10-149-242	12.00	SAMPLE
	Check Date 10/4/2007	Check Nbr	014358		Check Total:	12.00
23152 WE ENERGIES	092107	31100	54	10-143-223	1,864.02	STREET LIGHTS
	Check Date 10/4/2007	Check Nbr	014359		Check Total:	1,864.02
	100107	31733	51	02-116-730	2,003.40	CLAIM AGAINST THE CITY
	Check Date 10/4/2007	Check Nbr	014360		Check Total:	2,003.40
23215 WIL-KIL PEST CONTROL	1185025	31100	53	09-212-205	103.00	EXT INSECT
	Check Date 10/4/2007	Check Nbr	014361		Check Total:	103.00
23275 WINNEBAGO COUNTY TREASURER	SEPTEMPBER	31310	57	04-101-610	1,637.36	WINN CO IND DEV PRINCIPAL
	SEPTEMPBER	31310	57	04-201-620	512.64	WINN CO IND DEV INTEREST
	Check Date 10/4/2007	Check Nbr	014362		Check Total:	2,150.00
23455 WISCONSIN SUPPORT COLLECTIONS		31100	21	04-299-015	436.31	
		31100	21	04-299-016	138.40	
	Check Date 10/4/2007	Check Nbr	014363		Check Total:	574.71

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23548 WPELRA	092507	31100	52	08-101-337	120.00	SUPERVISOR SEMINAR REG
	<u>Check Date</u> 10/4/2007	<u>Check Nbr</u>	<u>014364</u>		<u>Check Total:</u>	<u>120.00</u>
				Grand Total:	235,667.46	

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01044 ABBEY PRESS	100807	31262	48	04-597-000	220.32	PAMPHLETS/REFERRAL RESOURCES
	Check Date 10/11/2007	Check Nbr	014365		Check Total:	220.32
01075 ACCURATE SUSPENSION WAREHOUSE	7016306	31731	54	10-149-300	66.56	BAND SAW BLADE
	7016072	31731	54	10-149-300	69.12	BRAKLEEN
	Check Date 10/11/2007	Check Nbr	014366		Check Total:	135.68
01550 AMERICA'S BEST VALUE INN	100407	31262	52	08-101-333	540.00	VCR GRANT TRAINING SESSION
	Check Date 10/11/2007	Check Nbr	014367		Check Total:	540.00
01675 AMT		31100	21	04-299-022	150.00	
	Check Date 10/11/2007	Check Nbr	014368		Check Total:	150.00
07182 APWA-WISCONSIN CHAPTER	100807	31100	54	10-111-332	280.00	FALL CONFERENCE REGISTRATION
	Check Date 10/11/2007	Check Nbr	014385		Check Total:	280.00
02040 BADGER HIGHWAYS CO INC	137775	31100	54	10-121-300	38,909.20	PAVING PROJECT
	137831	31100	54	10-134-300	6.38	RIP RAP MEADOWVIEW DRIVE
	2007-01(1)	31100	21	04-205-000	-698.86	KAUKAUNA/HIGH REHAB
	2007-01(1)	31100	54	10-121-822	13,977.30	KAUKAUNA/HIGH REHAB
	Check Date 10/11/2007	Check Nbr	014370		Check Total:	52,194.02
02050 BADGER LAB & ENGINEERING INC	INV000031327	31201	54	10-301-212	252.00	MENASHA UTILITIES WASTEWATERS
	Check Date 10/11/2007	Check Nbr	014371		Check Total:	252.00
02410 BERGSTROM	CVCS724745	31100	52	08-101-295	5,975.64	ENGINE REPAIRS
	FOCS105725	31100	52	08-101-295	601.97	VEHICLE REPAIR
	97961	31731	54	10-149-383	92.76	VEHICLE REPAIR
	Check Date 10/11/2007	Check Nbr	014372		Check Total:	6,670.37

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02472 CHANNING BETE	092707	31262	48	04-597-000	336.83	PAMPHLETS/VCR
	Check Date 10/11/2007	Check Nbr	014373		Check Total:	336.83
02500 BARB BIGALKE	100307	31262	52	08-101-310	10.48	BATTERIES FOR PAGERS
	Check Date 10/11/2007	Check Nbr	014374		Check Total:	10.48
02780 BRUCE MUNICIPAL EQUIPMENT INC	5072867	31731	54	10-149-383	98.77	BELT
	Check Date 10/11/2007	Check Nbr	014375		Check Total:	98.77
03225 CB SUPPLY COMPANY INC	0133769-IN	31731	54	10-149-383	122.27	BEARINGS/CUP
	Check Date 10/11/2007	Check Nbr	014376		Check Total:	122.27
03490 CLEAR WATER CAR WASH	1918	31100	52	08-101-295	45.75	VEHICLE WASHES/SEPTEMBER
	Check Date 10/11/2007	Check Nbr	014377		Check Total:	45.75
04135 DAVIS & KUELTHAU SC	284579	31100	51	02-103-211	188.00	WISCO ENTERPRISES
	Check Date 10/11/2007	Check Nbr	014378		Check Total:	188.00
04139 VALERIE DAVIS	100107	31100	53	09-102-331	18.92	MILEAGE
	100107	31100	53	09-104-331	1.16	MILEAGE
	Check Date 10/11/2007	Check Nbr	014379		Check Total:	20.08
04275 DIGICORPORATION	325454	31731	54	10-149-310	129.50	WORK ORDER FORMS
	Check Date 10/11/2007	Check Nbr	014380		Check Total:	129.50
04450 DWD-UI	94413	31100	51	04-107-162	424.71	ASSESSOR
	Check Date 10/11/2007	Check Nbr	014381		Check Total:	424.71

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06115 FERRELLGAS	1017561185	31266	54	10-307-216	44.61	LIQUEFIED PETROLUEM GAS
	Check Date 10/11/2007	Check Nbr	014382		Check Total:	44.61
06685 MARY FRITZ	080107	31100	53	09-102-331	12.13	MILEAGE
	Check Date 10/11/2007	Check Nbr	014383		Check Total:	12.13
07080 GANNETT WISCONSIN NEWSPAPERS	0002985371	31100	51	02-104-292	54.40	LEGALS
	0002985371	31100	51	04-101-292	5,004.71	LEGALS
	Check Date 10/11/2007	Check Nbr	014384		Check Total:	5,059.11
07580 GUNDERSON UNIFORM & LINEN RENT	1219973	31100	51	10-115-201	14.29	MAT/MOP SERVICE
	1219973	31100	53	09-212-313	3.19	MAT/MOP SERVICE
	1219973	31100	55	07-202-313	3.19	MAT/MOP SERVICE
	Check Date 10/11/2007	Check Nbr	014386		Check Total:	20.67
09082 IMPERIAL SUPPLIES LLC	E39866	31731	54	10-149-383	64.20	WINTER BLADES
	Check Date 10/11/2007	Check Nbr	014387		Check Total:	64.20
09105 INDEPENDENT INSPECTIONS LTD	300495	31100	52	03-301-216	12,739.76	PERMITS FOR SEPTEMBER 2007
	Check Date 10/11/2007	Check Nbr	014388		Check Total:	12,739.76
09290 INTERSTATE BATTERY OF GREEN BA	160915	31731	54	10-149-383	80.95	BATTERY
	Check Date 10/11/2007	Check Nbr	014389		Check Total:	80.95
10165 MARY JANSSEN	092807	31100	52	08-101-331	77.88	MILEAGE/TIME SCHOOL
	092807	31100	52	08-101-338	9.00	MEALS/TIME SCHOOL
	Check Date 10/11/2007	Check Nbr	014390		Check Total:	86.88
10320 JEFF JORGENSON	092707	31100	52	08-101-338	220.32	WCPA CONVENTION/CONFERENCE
	Check Date 10/11/2007	Check Nbr	014391		Check Total:	220.32

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10335 JX ENTERPRISES INC	D272530122	31731	54	10-149-383	6.04	BEARING/THROTTLE ROD
	D272610116	31731	54	10-149-383	30.15	LUBRIQUIP KIT
	Check Date 10/11/2007	Check Nbr	014392		Check Total:	36.19
11030 KAEMPFER & ASSOCIATES INC	13373	31201	54	10-301-212	2,224.22	IND DISC REG PROGRAM
	13374	31201	54	10-301-212	1,613.44	IND DISC REG PROG/SEWER MONITR
	13375	31201	54	10-301-212	358.67	WW COLLECTION SYS REHAB IMPROV
	13377	31201	19	04-540-000	671.94	WW COLLECTION SYS REHAB IMPROV
	13378	31201	54	10-301-212	398.02	WW CONSULTING SERVICES
	Check Date 10/11/2007	Check Nbr	014393		Check Total:	5,266.29
11075 GREG KEIL	101007	31201	54	10-301-212	126.71	REIMBURSE SUMP PUMP/PIT
	Check Date 10/11/2007	Check Nbr	014394		Check Total:	126.71
11365 KUNDINGER FLUID POWER INC	P-54650-0	31731	54	10-149-383	46.52	FLEXIBLE HOSE
	Check Date 10/11/2007	Check Nbr	014395		Check Total:	46.52
12035 CHERYL LAABS	073106	31100	53	09-102-331	14.69	MILEAGE
	073106	31100	53	09-114-331	8.01	MILEAGE
	073106	31100	53	09-118-331	4.45	MILEAGE
	093007	31100	53	09-102-331	35.89	MILEAGE
	Check Date 10/11/2007	Check Nbr	014396		Check Total:	63.04
12092 LAKE PARK VILLAS HOMEOWNERS	083107	31482	54	10-143-223	31.78	UTILITIES
	083107	31482	55	07-202-216	2,507.11	MAINTENANCE FEES
	083107	31482	55	07-202-223	1,288.50	UTILITIES
	083107	31482	56	03-501-211	1,083.00	KRAUS & METZ
	083107	31482	56	03-501-216	150.00	HOMEOWNER FEES
	Check Date 10/11/2007	Check Nbr	014397		Check Total:	5,060.39

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12225 JOSEPH LAUX		31100	51	01-102-331	102.82	MILEAGE
		31100	51	01-102-333	46.00	MEALS
	Check Date 10/11/2007	Check Nbr	014398		Check Total:	148.82
12375 LEVENHAGEN CORPORATION	60386	31207	55	07-205-381	3,665.34	LEAD FREE GAS/MARINA
	60383	31207	55	07-205-381	2,589.08	LEAD FREE GAS/MARINA
	60536	31207	55	07-205-311	3,259.89	LEAD FREE GAS/MARINA
	029977A-IN	31731	54	10-149-300	115.20	MOLY ULTRA RED
	Check Date 10/11/2007	Check Nbr	014399		Check Total:	9,629.51
12450 LINCOLN CONTRACTORS SUPPLY INC	10391240	31731	54	10-149-383	326.18	PLATE
	Check Date 10/11/2007	Check Nbr	014400		Check Total:	326.18
13043 MANAWA TELEPHONE CO	100107	31100	51	04-109-221	39.95	CABIN DSL
	Check Date 10/11/2007	Check Nbr	014401		Check Total:	39.95
13045 MANDERFIELD BAKERY	267288	31827	53	09-212-300	9.00	AUGUST PARTY
	Check Date 10/11/2007	Check Nbr	014402		Check Total:	9.00
13097 MARSHALL & ILSLEY TRUST-MILW	5108028	31100	51	02-105-216	260.00	MONTHLY FEE
	Check Date 10/11/2007	Check Nbr	014403		Check Total:	260.00
13149 MATTHEWS COMMERCIAL TIRE CTR	022401	31731	54	10-149-382	62.94	FLAT REPAIR
	Check Date 10/11/2007	Check Nbr	014404		Check Total:	62.94
13345 MENARDS-APPLETON EAST	99307	31100	55	07-202-240	59.04	ANTIFREEZE FOR WINTERIZATION
	Check Date 10/11/2007	Check Nbr	014405		Check Total:	59.04

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13360 MENASHA ELECTRIC & WATER UTILI	092507	31100	12	04-399-000	7.39	RACINE/NINTH
	092507	31100	54	10-131-223	170.38	TRAFFIC LIGHTS
	092507	31201	54	10-301-223	62.85	LIFT STATIONS
	092507	31100	55	07-202-223	590.78	PARKS
	092507	31100	55	07-202-223	11.04	RACINE/HWY 441
	092507	31100	55	07-202-225	202.22	PARKS
	Check Date	10/11/2007	Check Nbr	014406	Check Total:	1,044.66
13370 MENASHA EMPLOYEES CREDIT UNION		31100	21	04-299-020	2,007.00	
		31100	21	04-299-020	19,593.00	
	Check Date	10/11/2007	Check Nbr	014407	Check Total:	21,600.00
13375 MENASHA EMPLOYEES LOCAL 1035		31100	21	04-299-031	248.00	
	Check Date	10/11/2007	Check Nbr	014408	Check Total:	248.00
13377 MENASHA EMPLOYEES LOCAL 1035B		31100	21	04-299-032	249.16	
	Check Date	10/11/2007	Check Nbr	014409	Check Total:	249.16
13435 MENASHA POSTMASTER	100407	31266	54	10-307-311	1,452.89	BULK MAILING/HORIZON NEWSLETTR
	Check Date	10/11/2007	Check Nbr	014410	Check Total:	1,452.89
	100307	31100	53	09-212-311	50.00	POSTAGE NOVEMBER NEWSLETTER
	Check Date	10/11/2007	Check Nbr	014411	Check Total:	50.00
13685 MINNESOTA MUTUAL LIFE INSURANC	NOVEMBER2007	31100	21	04-618-000	2,450.61	BASIC/EMPLR LIFE INSURANCE
	Check Date	10/11/2007	Check Nbr	014412	Check Total:	2,450.61
13750 MORTON PHARMACY	093007	31100	55	07-203-300	0.34	FINANCE CHARGE/LATE PAYMENT
	03121124	31100	55	07-201-300	22.88	FIRST AID SUPPLIES
	Check Date	10/11/2007	Check Nbr	014413	Check Total:	23.22

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13807 TRACY MROCHEK	091207	31100	53	09-102-331	48.16	MILEAGE
	Check Date 10/11/2007	Check Nbr	014414		Check Total:	48.16
14010 N&M AUTO SUPPLY	189116	31731	54	10-149-383	8.25	SPARK PLUG
	189122	31731	54	10-149-383	11.68	BELT
	Check Date 10/11/2007	Check Nbr	014415		Check Total:	19.93
14205 CITY OF NEENAH TREASURER	30692	31100	52	05-201-803	2,397.90	BALANCE DUE FROM CAPITAL
	Check Date 10/11/2007	Check Nbr	014416		Check Total:	2,397.90
14215 NEENAH-MENASHA MUNICIPAL COURT	100807	31100	21	04-229-000	182.00	BOND
	100807	31100	21	04-229-000	308.00	BOND
	100807	31100	21	04-229-000	182.00	BOND
	100807	31100	21	04-229-000	119.00	BOND
	100807	31100	21	04-229-000	119.00	BOND
	100807	31100	21	04-229-000	119.00	BOND
	100807	31100	21	04-229-000	245.00	BOND
	100807	31100	21	04-229-000	119.00	BOND
	Check Date 10/11/2007	Check Nbr	014417		Check Total:	1,393.00
14415 NORTHEAST ASPHALT INC	855886	31100	54	10-122-300	1,436.55	COMMERCIAL GRADE
	Check Date 10/11/2007	Check Nbr	014418		Check Total:	1,436.55

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15080 OFFICEMAX CONTRACT INC	574529	31100	53	09-212-310	-12.79	PLANNER REFUND
	889098	31100	54	10-111-300	49.06	ENVELOPES
	889098	31100	54	10-111-310	14.99	LANTERN BATTERIES
	741083	31100	54	10-111-310	43.19	OFFICE SUPPLIES/ENG
	741083	31100	55	07-201-310	23.27	OFFICE SUPPLIES/P & R
	741083	31100	56	03-202-310	56.46	OFFICE SUPPLIES/COM DEV
	629040	31100	51	10-115-310	16.86	OFFICE SUPPLIES/2ND FL PAPER
	629040	31100	54	10-111-310	88.00	OFFICE SUPPLIES/ENG
	629040	31100	55	07-201-310	22.61	OFFICE SUPPLIES/PARK
	629040	31100	56	03-202-310	22.61	OFFICE SUPPLIES/COM DEV
Check Date	10/11/2007	Check Nbr	014419		Check Total:	324.26
15130 NICHOLAS OLESZAK	092107	31100	52	08-101-338	92.21	MEALS/TRAINING
	Check Date	10/11/2007	Check Nbr	014420		Check Total:
15280 OUTAGAMIE COUNTY CLERK OF COUR	100807	31100	21	04-229-000	109.00	BOND
	Check Date	10/11/2007	Check Nbr	014421		Check Total:
16465 POSTAL ANNEX	118816	31100	52	08-101-311	17.72	POLICE
	118862	31100	53	09-103-311	23.81	HEALTH
	119502	31100	52	08-101-311	5.54	POLICE
	119612	31100	52	08-101-311	47.76	POLICE DEPT
	119813	31278	53	09-116-216	5.59	COMM DEV
	Check Date	10/11/2007	Check Nbr	014422		Check Total:
18120 RC EXCAVATING INC	856	31485	56	03-202-822	5,521.20	CRUSHED CONCRETE/NATURES WAY
	Check Date	10/11/2007	Check Nbr	014423		Check Total:
18190 REGISTRATION FEE TRUST TVRP	101007	31100	45	04-403-000	500.00	PARKING TICKET PROCESS FEE
	Check Date	10/11/2007	Check Nbr	014424		Check Total:

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18200 REINDERS INC	841186-00	31100	54	10-134-300	68.80	STRAW DITCH/MANITOWOC/MEADOWVW
	Check Date 10/11/2007	Check Nbr	014425		Check Total:	68.80
18430 ROLAND MACHINERY EXCHANGE	21035590	31731	54	10-149-383	200.26	COMPRESSION SR
	21035589	31731	54	10-149-383	-317.00	SOLENOID COIL
	Check Date 10/11/2007	Check Nbr	014426		Check Total:	-116.74
19035 SAFETY KLEEN SYSTEMS INC	M004396433	31266	54	10-307-216	200.00	PICKING UP ABSORBANTS
	Check Date 10/11/2007	Check Nbr	014427		Check Total:	200.00
01925 SANOFI PASTEUR INC	94989576	31100	53	09-102-300	45.88	TUBERSOL TEST ANTIGEN
	Check Date 10/11/2007	Check Nbr	014369		Check Total:	45.88
19130 DIANE SCHABACH	092807	31207	55	07-205-216	10,725.00	HARBORMASTER AGREEMENT
	Check Date 10/11/2007	Check Nbr	014428		Check Total:	10,725.00
19155 PAUL SCHEPPF	100107	31100	52	08-101-338	91.89	MEALS/TRAINING
	Check Date 10/11/2007	Check Nbr	014429		Check Total:	91.89
19325 SERVICE MOTOR COMPANY	IV53343	31731	54	10-149-383	178.40	SHOCK
	Check Date 10/11/2007	Check Nbr	014430		Check Total:	178.40
19327 SERVICEMASTER BUILDING MTNCE	117071	31100	52	08-101-201	1,495.00	CONTRACT JANITORIAL OCT 2007
	117135	31100	52	08-101-201	50.00	CLEAN GARAGE IN OCTOBER
	Check Date 10/11/2007	Check Nbr	014431		Check Total:	1,545.00
20045 BARB TAYLOR	092807	31100	53	09-212-331	50.93	MILEAGE
	Check Date 10/11/2007	Check Nbr	014432		Check Total:	50.93

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20075 TEL/COM	10064976	31262	52	08-101-221	276.95	PAGERS
	Check Date 10/11/2007	Check Nbr	014433		Check Total:	276.95
21045 UNIFIRST CORPORATION	0970019914	31731	54	10-149-201	69.01	MAT/MOP/CLOTHING PROTECTION
	Check Date 10/11/2007	Check Nbr	014434		Check Total:	69.01
21095 UNITED WAY FOX CITIES		31100	21	04-299-021	99.50	
	Check Date 10/11/2007	Check Nbr	014435		Check Total:	99.50
21205 US CELLULAR	200267787-043	31100	51	01-102-221	45.64	LAUX
	200267787-043	31100	51	02-103-221	40.95	BRANDT
	200267787-043	31100	51	04-106-221	10.08	STOFFEL
	200267787-043	31100	51	04-109-221	58.97	JAMES/LACEY
	200267787-043	31100	51	10-115-221	39.39	ALIX
	200267787-043	31100	52	08-101-221	547.61	POLICE
	200267787-043	31100	53	09-103-221	45.65	DREW
	200267787-043	31100	53	09-119-221	138.15	HEALTH
	200267787-043	31100	54	10-111-221	162.40	ENGINEERING
	200267787-043	31731	54	10-149-221	70.92	JACOBSON/PWF
	200267787-043	31201	54	10-301-221	10.22	CONFINED SPACE
	200267787-043	31100	55	07-201-221	72.21	TUNGATE
	200267787-043	31100	55	07-202-221	195.24	PARK
	200267787-043	31100	55	07-203-221	-7.78	POOL
	200267787-043	31100	56	03-202-221	70.21	COMM DEV
	Check Date 10/11/2007	Check Nbr	014436		Check Total:	1,499.86
21226 US OIL CO INC	609996	31100	13	04-103-000	21,660.08	NO LEAD GAS
	Check Date 10/11/2007	Check Nbr	014437		Check Total:	21,660.08
	100107	31100	52	08-101-295	10.26	NO LEAD GAS
	Check Date 10/11/2007	Check Nbr	014438		Check Total:	10.26

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Vendor ID / Name	Invoice Nbr	CpnyID	Acct	Subaccount	Amount	Invoice Description
21230 US PETROLEUM EQUIPMENT	161367	31207	55	07-205-204	350.00	FUEL LINE TESTING/MARINA
	Check Date 10/11/2007	Check Nbr	014439		Check Total:	350.00
23160 WERNER ELECTRIC SUPPLY CO	S2264273.001	31100	13	04-106-000	113.76	BULBS
	Check Date 10/11/2007	Check Nbr	014440		Check Total:	113.76
23215 WIL-KIL PEST CONTROL	1184925	31731	54	10-149-207	62.00	COMMERCIAL CONTRACT
	Check Date 10/11/2007	Check Nbr	014441		Check Total:	62.00
23217 KEN WILLIAMSON	100307	31827	53	09-212-205	150.00	CHRISTMAS BANQUET ENTERTAIN
	Check Date 10/11/2007	Check Nbr	014442		Check Total:	150.00
23250 WINNEBAGO COUNTY CLERK OF COUR	100807	31100	21	04-229-000	285.00	BOND
	100807	31100	21	04-229-000	135.00	BOND
	100807	31100	21	04-229-000	250.00	BOND
	100807	31100	21	04-229-000	385.00	BOND
	100807	31100	21	04-229-000	385.00	BOND
	100807	31100	21	04-229-000	535.00	BOND
	100807	31100	21	04-229-000	150.00	BOND
	Check Date 10/11/2007	Check Nbr	014443		Check Total:	2,125.00
23275 WINNEBAGO COUNTY TREASURER	SHJ100389	31100	52	08-602-250	308.00	JAIL DIVISION
	Check Date 10/11/2007	Check Nbr	014444		Check Total:	308.00

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Vendor ID / Name	Invoice Nbr	CpnyID	Acct	Subaccount	Amount	Invoice Description
23455 WISCONSIN SUPPORT COLLECTIONS		31100	21	04-299-015	436.31	
		31100	21	04-299-016	138.40	
		31100	21	04-299-015	894.60	
Check Date	10/11/2007	Check Nbr	014445		Check Total:	1,469.31
					Grand Total:	181,326.05