

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 6970

DESCRIPTION		AMOUNT
PO: 17-07258 DESC: December 2017 Collections INV: DECEMBER 2017 AMT: 1,810.01		1,810.01
VENDOR DISTRICT ATTORNEY VICTIM WITNE		CHECK DATE 12/27/17
		CHECK AMOUNT 1,810.01

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 6970

DESCRIPTION		AMOUNT
PO: 17-07258 DESC: December 2017 Collections INV: DECEMBER 2017 AMT: 1,810.01		1,810.01
Fax Date _____ Sent Date <u>DEC 28 2017</u>		
VENDOR DISTRICT ATTORNEY VICTIM WITNE		CHECK DATE 12/27/17
		CHECK AMOUNT 1,810.01

DETACH BEFORE DEPOSITING

THIS DOCUMENT HAS A COLORED BACKGROUND AND FLUORESCENT FIBERS • SEE ADDITIONAL SECURITY FEATURES ON REVERSE SIDE • MISSING A FEATURE INDICATES A COPY

BRYAN COUNTY
General Checking
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

First Bank of Coastal Georgia
P.O. Box 8
Pembroke, Ga 31321
64-684/612

NO. 6970

VOID AFTER 180 DAYS

DATE ISSUED
12/27/17

CHECK NO.
6970

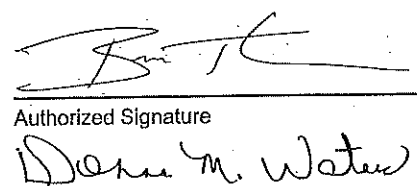
CHECK AMOUNT
\$*****1,810.01

One Thousand Eight Hundred Ten AND 01/100 Dollars

TO THE ORDER OF:
DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313

Authorized Signature



Authorized Signature

BRYAN COUNTY BOARD OF COMMISSIONERS

PEMBROKE, GEORGIA December 2017

PAID : WEEKLY _____ BI-WEEKLY _____ MONTHLY x

VENDOR # 4779

TO: DISTRICT ATTORNEY VICTIM WITNESS PROGRAM

945 E.G. MILES PARKWAY

HINESVILLE, GA. 31313

ITEM NUMBER	DESCRIPTION	AMOUNT
(755) 2200.250.7.2001	MONTHLY COLLECTIONS	
	GET AMOUNT FROM REPORT	
		1810.01

BRYAN COUNTY GEORGIA

Having Examined the above against Bryan County and find it to be Just, True and correct
To the best of my knowledge.

Signature of Clerk of Bryan County Board of Commissioners

[illegible]



Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321
Phone: (912)653-3835

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-07258

SHIP TO

VENDOR

Vendor #: DISTR010

DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313

ORDER DATE: 12/26/17

DELIVERY DATE:

STATE CONTRACT:

F.O.B. TERMS:

VENDOR ACCT NUM:

VENDOR PHONE #:

VENDOR FAX #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 58-6002921

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	December 2017 Collections	755-250-2200-57-2001	1,810.0100	1,810.01
		DISTRICT ATTORNEY CVW PROGRAM		
			TOTAL	1,810.01

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS
VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT
IS SIGNED BELOW

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 6506

BRYAN COUNTY

DESCRIPTION

AMOUNT

PO: 17-05721 DESC: NOVEMBER COLLECTIONS
 INV: NOVEMBER 2017 AMT: 4,229.24

4,229.24

VENDOR

DISTRICT ATTORNEY VICTIM WITNE

CHECK DATE
11/29/17CHECK AMOUNT
4,229.24

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 6506

DESCRIPTION

AMOUNT

PO: 17-05721 DESC: NOVEMBER COLLECTIONS
 P.O. INV: NOVEMBER 2017 AMT: 4,229.24
 Pembroke, Ga 31321

4,229.24

VENDOR

DISTRICT ATTORNEY VICTIM WITNE

CHECK DATE
11/29/17CHECK AMOUNT
4,229.24

DETACH BEFORE DEPOSITING

Fax Date

Sent Date

NOV 29 2017

BRYAN COUNTY

General Checking
 51 N. Courthouse Street
 P.O. Box 430
 Pembroke, GA 31321

First Bank of Coastal Georgia

P.O. Box 2
 Pembroke, Ga 31321
 64-684/512

NO. 6506

VOID AFTER 180 DAYS

DATE ISSUED
11/29/17CHECK NO.
6506CHECK AMOUNT
\$*****4,229.24

Four Thousand Two Hundred Twenty Nine AND 24/100 Dollars

TO THE ORDER OF:

DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
 HINESVILLE, GA 31313

Authorized Signature

Authorized Signature

THIS DOCUMENT HAS A COLORED BACKGROUND AND FLUORESCENT NUMBERS. IF THE NUMBERS ARE NOT VISIBLE, THE REVERSE SIDE OF THE DOCUMENT MAY BE A COPY.

BRYAN COUNTY BOARD OF COMMISSIONERS

PEMBROKE, GEORGIA November 20 17

PAID : WEEKLY _____ BI-WEEKLY _____ MONTHLY x

VENDOR # 4779

TO: DISTRICT ATTORNEY VICTIM WITNESS PROGRAM

945 E.G. MILES PARKWAY

HINESVILLE, GA. 31313

ITEM NUMBER	DESCRIPTION	AMOUNT
(755) 2200.250\$7.2001	MONTHLY COLLECTIONS	
	GET AMOUNT FROM REPORT	
		4,229.24

BRYAN COUNTY GEORGIA

Having Examined the above against Bryan County and find it to be Just, True and correct
To the best of my knowledge.

Signature of Clerk of Bryan County Board of Commissioners

[illegible]



Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321
Phone: (912)653-3835

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-06721

SHIP TO

ORDER DATE: 11/28/17

DELIVERY DATE:

STATE CONTRACT:

F.O.B. TERMS:

VENDOR ACCT NUM:

VENDOR PHONE #:

VENDOR FAX #:

VENDOR

Vendor #: DISTR010

DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 58-6002921

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	NOVEMBER COLLECTIONS	755-250-2200-57-2001	4,229.2400	4,229.24
		DISTRICT ATTORNEY CVW PROGRAM		
			TOTAL	4,229.24

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS
VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT
IS SIGNED BELOW

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 6037

DESCRIPTION		AMOUNT	
PO: 17-06089 DESC: October 2017 Collections INV: OCTOBER 2017 AMT: 3,675.00		3,675.00	
VENDOR DISTRICT ATTORNEY VICTIM WITNE		CHECK DATE 10/25/17	CHECK AMOUNT 3,675.00

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 6037

DESCRIPTION		AMOUNT	
PO: 17-06089 DESC: October 2017 Collections INV: OCTOBER 2017 AMT: 3,675.00		3,675.00	
VENDOR DISTRICT ATTORNEY VICTIM WITNE		CHECK DATE 10/25/17	CHECK AMOUNT 3,675.00

Fax Date OCT 26 2017
Sent Date _____

DETACH BEFORE DEPOSITING

THIS DOCUMENT HAS A COLORED BACKGROUND AND FLUORESCENT FIBERS. SEE ADDITIONAL SECURITY FEATURES ON REVERSE SIDE. MISSING A FEATURE INDICATES A COPY.

BRYAN COUNTY
General Checking
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

First Bank of Coastal Georgia
P.O. Box 8
Pembroke, Ga 31321
64-684/612

NO. 6037

VOID AFTER 180 DAYS

DATE ISSUED
10/25/17

CHECK NO.
6037

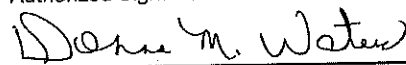
CHECK AMOUNT
\$*****3,675.00

Three Thousand Six Hundred Seventy Five AND 00/100 Dollars

TO THE ORDER OF:
DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313

Authorized Signature



Authorized Signature

BRYAN COUNTY BOARD OF COMMISSIONERS

PEMBROKE, GEORGIA October 2017

PAID : WEEKLY _____ BI-WEEKLY _____ MONTHLY x

VENDOR # 4779

TO: DISTRICT ATTORNEY VICTIM WITNESS PROGRAM

945 E.G. MILES PARKWAY

HINESVILLE, GA. 31313

ITEM NUMBER	DESCRIPTION	AMOUNT
(755) 2200.250\$7.2001	MONTHLY COLLECTIONS	
	GET AMOUNT FROM REPORT	
		3675.05

BRYAN COUNTY GEORGIA

Having Examined the above against Bryan County and find it to be Just, True and correct
To the best of my knowledge.

Signature of Clerk of Bryan County Board of Commissioners

Range of Accounts: 755-00-35-110	to 755-00-35-1172	Start Month: October	Start Year: 2017
Type: Revenue Activity	Includes Accounts with Zero Activity: N		Year To Date As Of: 10/24/17
Subtotal DEPT: No	Subtotal SOURCE: No		

[illegible]



Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321
Phone: (912)653-3835

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-06089

SHIP TO

ORDER DATE: 10/24/17

DELIVERY DATE:

STATE CONTRACT:

F.O.B. TERMS:

VENDOR ACCT NUM:

VENDOR PHONE #:

VENDOR FAX #:

VENDOR

Vendor #: DISTR010

DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 58-6002921

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	October 2017 Collections	755-250-2200-57-2001 DISTRICT ATTORNEY CVW PROGRAM	3,675.0000	3,675.00
			TOTAL	3,675.00

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS
VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT
IS SIGNED BELOW

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 5618

DESCRIPTION		AMOUNT	
PO: 17-05467 DESC: SEPTEMBER 2017 COLLECTIONS INV: SEPTEMBER 2017 AMT: 1,772.82		1,772.82	
VENDOR DISTRICT ATTORNEY VICTIM WITNE		CHECK DATE 09/27/17	CHECK AMOUNT 1,772.82

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 5618

DESCRIPTION		AMOUNT	
PO: 17-05467 DESC: SEPTEMBER 2017 COLLECTIONS INV: SEPTEMBER 2017 AMT: 1,772.82		1,772.82	
VENDOR DISTRICT ATTORNEY VICTIM WITNE		CHECK DATE 09/27/17	CHECK AMOUNT 1,772.82

Fax Date _____
Sent Date SEP 28 2017

DETACH BEFORE DEPOSITING

THIS DOCUMENT HAS A COLORED BACKGROUND AND FLUORESCENT FIBERS • SEE ADDITIONAL SECURITY FEATURES ON REVERSE SIDE • MISSING A FEATURE INDICATES A COPY

BRYAN COUNTY
General Checking
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

First Bank of Coastal Georgia
P.O. Box 8
Pembroke, Ga 31321
64-684/612

NO. 5618

VOID AFTER 180 DAYS

DATE ISSUED
09/27/17

CHECK NO.
5618

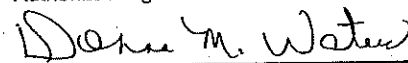
CHECK AMOUNT
\$*****1,772.82

One Thousand Seven Hundred Seventy Two AND 82/100 Dollars

TO THE ORDER OF:
DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313

Authorized Signature



Authorized Signature

BRYAN COUNTY BOARD OF COMMISSIONERS

PEMBROKE, GEORGIA SEPTEMBER 20 17

PAID : WEEKLY _____ BI-WEEKLY _____ MONTHLY x

VENDOR # 4779

TO: DISTRICT ATTORNEY VICTIM WITNESS PROGRAM

945 E.G. MILES PARKWAY

HINESVILLE, GA. 31313

ITEM NUMBER	DESCRIPTION	AMOUNT
(755) 2200.250.7.2001	MONTHLY COLLECTIONS	
	GET AMOUNT FROM REPORT	
		1772.82

BRYAN COUNTY GEORGIA

Having Examined the above against Bryan County and find it to be Just, True and correct
To the best of my knowledge.

Signature of Clerk of Bryan County Board of Commissioners



Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321
Phone: (912)653-3835

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-05467

SHIP TO

ORDER DATE: 09/25/17

DELIVERY DATE:

STATE CONTRACT:

F.O.B. TERMS:

VENDOR ACCT NUM:

VENDOR PHONE #:

VENDOR FAX #:

VENDOR

Vendor #: DISTR010

DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 58-6002921

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	SEPTEMBER 2017 COLLECTIONS	755-250-2200-57-2001	1,772.8200	1,772.82
		DISTRICT ATTORNEY CVW PROGRAM		
			TOTAL	1,772.82

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties, of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 5300

DESCRIPTION		AMOUNT
PO: 17-05012 DESC: AUGUST 2017 COLLECTIONS INV: AUGUST 2017 AMT: 4,909.26		4,909.26
VENDOR DISTRICT ATTORNEY VICTIM WITNE		CHECK DATE 08/29/17
		CHECK AMOUNT 4,909.26

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 5300

DESCRIPTION		AMOUNT
PO: 17-05012 DESC: AUGUST 2017 COLLECTIONS INV: AUGUST 2017 AMT: 4,909.26		4,909.26
VENDOR DISTRICT ATTORNEY VICTIM WITNE		CHECK DATE 08/29/17
		CHECK AMOUNT 4,909.26

Fax Date _____
Sent Date AUG 30 2017

DETACH BEFORE DEPOSITING

THIS DOCUMENT HAS A COLORED BACKGROUND AND FLUORESCENT FIBERS • SEE ADDITIONAL SECURITY FEATURES ON REVERSE SIDE • MISSING A FEATURE INDICATES A COPY

BRYAN COUNTY

General Checking
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

First Bank of Coastal Georgia
P.O. Box 8
Pembroke, Ga 31321
64-684/612

NO. 5300

VOID AFTER 180 DAYS

DATE ISSUED
08/29/17

CHECK NO.
5300

CHECK AMOUNT
\$*****4,909.26

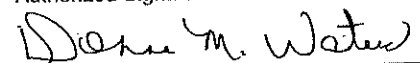
Four Thousand Nine Hundred Nine AND 26/100 Dollars

TO THE ORDER OF:

DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313

Authorized Signature



Authorized Signature

BRYAN COUNTY BOARD OF COMMISSIONERS

PEMBROKE, GEORGIA AUGUST 20 17

PAID : WEEKLY _____ BI-WEEKLY _____ MONTHLY x

VENDOR # 4779

TO: DISTRICT ATTORNEY VICTIM WITNESS PROGRAM

945 E.G. MILES PARKWAY

HINESVILLE, GA. 31313

ITEM NUMBER	DESCRIPTION	AMOUNT
(755) 2200.250\$7.2001	MONTHLY COLLECTIONS	
	GET AMOUNT FROM REPORT	
		4909.26

BRYAN COUNTY GEORGIA

Having Examined the above against Bryan County and find it to be Just, True and correct
To the best of my knowledge.

Signature of Clerk of Bryan County Board of Commissioners

Range of Accounts: 755-00-35-110 to 755-00-35-1172
Type: Revenue Activity Includes Accounts with Zero Activity: N
Subtotal DEPT: No Subtotal SOURCE: No

Start Month: January
Start Year: 2017
Year To Date As of: 08/25/17

Account No Description	Total	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
755-00-35-1110	899.57	0.00	0.00	175.00	0.00	119.24	415.33	25.00	165.00	0.00	0.00	0.00	0.00
SUPERIOR COURT													
755-00-35-1120	15481.29	0.00	0.00	4399.56	0.00	2588.76	3361.57	2774.42	2356.98	0.00	0.00	0.00	0.00
STATE COURT													
755-00-35-1130	35.60	0.00	0.00	5.10	0.00	0.00	12.70	0.00	17.80	0.00	0.00	0.00	0.00
MAGISTRATE COURT													
755-00-35-1160	34.91	0.00	0.00	28.39	0.00	0.00	0.00	0.00	6.52	0.00	0.00	0.00	0.00
JUVENILE COURT													
755-00-35-1171	3959.29	0.00	783.54	677.61	680.95	477.75	509.06	408.31	422.07	0.00	0.00	0.00	0.00
CITY OF PEMBROKE													
755-00-35-1172	18562.31	0.00	3295.36	2632.61	3650.11	2319.57	2556.49	2167.28	1940.89	0.00	0.00	0.00	0.00
CITY OF RICHMOND HILL													
Fund Total	38972.97	0.00	4078.90	7918.27	4331.06	5505.32	6855.15	5375.01	4909.26	0.00	0.00	0.00	0.00
Grand Total													
Count: 6	38972.97	0.00	4078.90	7918.27	4331.06	5505.32	6855.15	5375.01	4909.26	0.00	0.00	0.00	0.00



Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321
Phone: (912)653-3835

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-05012

SHIP TO

ORDER DATE: 08/25/17

DELIVERY DATE:

STATE CONTRACT:

F.O.B. TERMS:

VENDOR ACCT NUM:

VENDOR PHONE #:

VENDOR FAX #:

VENDOR

Vendor #: DISTR010

DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 58-6002921

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	AUGUST 2017 COLLECTIONS	755-250-2200-57-2001	4,909.2600	4,909.26
		DISTRICT ATTORNEY CVW PROGRAM		
			TOTAL	4,909.26

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS
VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT
IS SIGNED BELOW

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 4916

DESCRIPTION		AMOUNT	
PO: 17-04450 DESC: July 2017 monthly collections INV: JULY 2017 AMT: 5,375.01		5,375.01	
VENDOR DISTRICT ATTORNEY VICTIM WITNE		CHECK DATE 08/02/17	CHECK AMOUNT 5,375.01

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 4916

DESCRIPTION		AMOUNT	
PO: 17-04450 DESC: July 2017 monthly collections INV: JULY 2017 AMT: 5,375.01		5,375.01	
VENDOR DISTRICT ATTORNEY VICTIM WITNE		CHECK DATE 08/02/17	CHECK AMOUNT 5,375.01

Fax Date _____
Sent Date AUG - 3 2017

DETACH BEFORE DEPOSITING

THIS DOCUMENT HAS A COLORED BACKGROUND AND FLUORESCENT FIBERS • SEE ADDITIONAL SECURITY FEATURES ON REVERSE SIDE • MISSING A FEATURE INDICATES A COPY

BRYAN COUNTY
General Checking
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

First Bank of Coastal Georgia
P.O. Box 8
Pembroke, Ga 31321
64-684/612

NO. 4916

VOID AFTER 180 DAYS

DATE ISSUED
08/02/17

CHECK NO.
4916

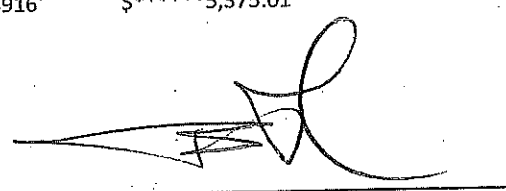
CHECK AMOUNT
\$*****5,375.01

Five Thousand Three Hundred Seventy Five AND 01/100 Dollars

TO THE ORDER OF:
DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313

Authorized Signature



Authorized Signature

BRYAN COUNTY BOARD OF COMMISSIONERS

PEMBROKE, GEORGIA JULY 2017

PAID : WEEKLY _____ BI-WEEKLY _____ MONTHLY X

VENDOR # 4779

TO: DISTRICT ATTORNEY VICTIM WITNESS PROGRAM

945 E.G. MILES PARKWAY

HINESVILLE, GA. 31313

ITEM NUMBER	DESCRIPTION	AMOUNT
(755) 2200.250\$7.2001	MONTHLY COLLECTIONS	
	GET AMOUNT FROM REPORT	
		5375.01

BRYAN COUNTY GEORGIA

Having Examined the above against Bryan County and find it to be Just, True and correct
To the best of my knowledge.

Signature of Clerk of Bryan County Board of Commissioners



Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321
Phone: (912)653-3835

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-04450

SHIP TO

ORDER DATE: 07/31/17

DELIVERY DATE:

STATE CONTRACT:

F.O.B. TERMS:

VENDOR ACCT NUM:

VENDOR PHONE #:

VENDOR FAX #:

VENDOR

Vendor #: DISTR010

DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 58-6002921

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	July 2017 monthly collections	755-250-2200-57-2001 DISTRICT ATTORNEY CVW PROGRAM	5,375.0100	5,375.01
			TOTAL	=====
				5,375.01

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS
VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT
IS SIGNED BELOW

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 4394

DESCRIPTION		AMOUNT	
PO: 17-03675 DESC: June 2017		6,855.15	
INV: JUNE 2017 AMT: 6,855.15			
VENDOR		CHECK DATE	CHECK AMOUNT
DISTRICT ATTORNEY VICTIM WITNE		06/29/17	6,855.15

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 4394

DESCRIPTION		AMOUNT	
PO: 17-03675 DESC: June 2017		6,855.15	
INV: JUNE 2017 AMT: 6,855.15			
Fax Date _____			
Sent Date <u>JUN 30 2017</u>			
VENDOR		CHECK DATE	CHECK AMOUNT
DISTRICT ATTORNEY VICTIM WITNE		06/29/17	6,855.15

DETACH BEFORE DEPOSITING

THIS DOCUMENT HAS A COLORED BACKGROUND AND FLUORESCENT FIBERS. SEE ADDITIONAL SECURITY FEATURES ON REVERSE SIDE. MISSING A FEATURE INDICATES A COPY.

BRYAN COUNTY
General Checking
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

First Bank of Coastal Georgia
P.O. Box 8
Pembroke, Ga 31321
64-684/612

NO. 4394

VOID AFTER 180 DAYS

DATE ISSUED
06/29/17

CHECK NO.
4394

CHECK AMOUNT
\$*****6,855.15

Six Thousand Eight Hundred Fifty Five AND 15/100 Dollars

TO THE ORDER OF:
DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313

Authorized Signature

Authorized Signature

BRYAN COUNTY BOARD OF COMMISSIONERS

PEMBROKE, GEORGIA June 2017

PAID : WEEKLY _____ BI-WEEKLY _____ MONTHLY x

VENDOR # 4779

TO: DISTRICT ATTORNEY VICTIM WITNESS PROGRAM

945 E.G. MILES PARKWAY

HINESVILLE, GA. 31313

ITEM NUMBER	DESCRIPTION	AMOUNT
(755) 2200.250#7.2001	MONTHLY COLLECTIONS	
	GET AMOUNT FROM REPORT	
		6855.15

BRYAN COUNTY GEORGIA

Having Examined the above against Bryan County and find it to be Just, True and correct
To the best of my knowledge.

Signature of Clerk of Bryan County Board of Commissioners

[illegible]



Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321
Phone: (912)653-3835

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-03675

SHIP TO

ORDER DATE: 06/29/17

DELIVERY DATE:

STATE CONTRACT:

F.O.B. TERMS:

VENDOR ACCT NUM:

VENDOR PHONE #:

VENDOR FAX #:

VENDOR

Vendor #: DISTR010

DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 58-6002921

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	June 2017	755-250-2200-57-2001 DISTRICT ATTORNEY CVW PROGRAM	6,855.1500	6,855.15
			TOTAL	=====
				6,855.15

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 3892

DESCRIPTION		AMOUNT	
PO: 17-03121 DESC: May 2017 INV: MAY 2017 AMT: 5,505.32		5,505.32	
VENDOR DISTRICT ATTORNEY VICTIM WITNE		CHECK DATE 06/02/17	CHECK AMOUNT 5,505.32

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 3892

DESCRIPTION		AMOUNT	
PO: 17-03121 DESC: May 2017 INV: MAY 2017 AMT: 5,505.32		5,505.32	
VENDOR DISTRICT ATTORNEY VICTIM WITNE		CHECK DATE 06/02/17	CHECK AMOUNT 5,505.32

Fax Date _____
Sent Date JUN 02 2017

DETACH BEFORE DEPOSITING

THIS DOCUMENT HAS A COLORED BACKGROUND AND FLUORESCENT FIBERS. SEE ADDITIONAL SECURITY FEATURES ON REVERSE SIDE. MISSING A FEATURE INDICATES A COPY.

BRYAN COUNTY
General Checking
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

First Bank of Coastal Georgia
P.O. Box 8
Pembroke, Ga 31321
64-684/612

NO. 3892

VOID AFTER 180 DAYS

DATE ISSUED
06/02/17


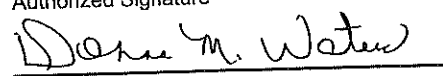
CHECK NO.
3892

CHECK AMOUNT
\$*****5,505.32

Five Thousand Five Hundred Five AND 32/100 Dollars

TO THE ORDER OF:
DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313


Authorized Signature

Authorized Signature

BRYAN COUNTY BOARD OF COMMISSIONERS

PEMBROKE, GEORGIA May 20 17

PAID : WEEKLY _____ BI-WEEKLY _____ MONTHLY x

VENDOR # 4779

TO: DISTRICT ATTORNEY VICTIM WITNESS PROGRAM

945 E.G. MILES PARKWAY

HINESVILLE, GA. 31313

ITEM NUMBER	DESCRIPTION	AMOUNT
(755) 2200.250.57.2001	MONTHLY COLLECTIONS	
	GET AMOUNT FROM REPORT	
		5505.32

BRYAN COUNTY GEORGIA

Having Examined the above against Bryan County and find it to be Just, True and correct
To the best of my knowledge.

Signature of Clerk of Bryan County Board of Commissioners



Bryan County
51-N: Courthouse Street
P.O. Box 430
Pembroke, GA 31321
Phone: (912)653-3835

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-03121

SHIP TO

VENDOR

Vendor #: DISTR010

DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313

ORDER DATE: 06/01/17

DELIVERY DATE:

STATE CONTRACT:

F.O.B. TERMS:

VENDOR ACCT NUM:

VENDOR PHONE #:

VENDOR FAX #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 58-6002921

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	May 2017	755-250-2200-57-2001 DISTRICT ATTORNEY CVW PROGRAM	5,505.3200	5,505.32
			TOTAL	5,505.32

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS
VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT
IS SIGNED BELOW

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 3678

DESCRIPTION		AMOUNT	
PO: 17-02446 DESC: April 2017 Victim Witness INV: APRIL 2017 AMT: 4,331.06		4,331.06	
VENDOR DISTRICT ATTORNEY VICTIM WITNE		CHECK DATE 05/10/17	CHECK AMOUNT 4,331.06

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 3678

DESCRIPTION		AMOUNT	
PO: 17-02446 DESC: April 2017 Victim Witness INV: APRIL 2017 AMT: 4,331.06		4,331.06	
Fax Date _____ Sent Date _____			
VENDOR DISTRICT ATTORNEY VICTIM WITNE		CHECK DATE 05/10/17	CHECK AMOUNT 4,331.06

DETACH BEFORE DEPOSITING

THIS DOCUMENT HAS A COLORED BACKGROUND AND FLUORESCENT FIBERS • SEE ADDITIONAL SECURITY FEATURES ON REVERSE SIDE • MISSING A FEATURE INDICATES A COPY

BRYAN COUNTY
General Checking
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

First Bank of Coastal Georgia
P.O. Box 8
Pembroke, Ga 31321
64-684/612

NO. 3678

VOID AFTER 180 DAYS

DATE ISSUED
05/10/17


CHECK NO.
3678

CHECK AMOUNT
\$*****4,331.06

Four Thousand Three Hundred Thirty One AND 06/100 Dollars

TO THE ORDER OF:
DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313

Authorized Signature

Authorized Signature

BRYAN COUNTY BOARD OF COMMISSIONERS

PEMBROKE, GEORGIA April 2017

PAID : WEEKLY _____ BI-WEEKLY _____ MONTHLY x

VENDOR # 4779

TO: DISTRICT ATTORNEY VICTIM WITNESS PROGRAM

945 E.G. MILES PARKWAY

HINESVILLE, GA. 31313

ITEM NUMBER	DESCRIPTION	AMOUNT
(755) 2200.250-7.2001		
	MONTHLY COLLECTIONS	
	City of Pembroke	680.95
	City of Richmond Hill	3650.11
	GET AMOUNT FROM REPORT	
	*Amount received in April	4331.06

BRYAN COUNTY GEORGIA

Having Examined the above against Bryan County and find it to be Just, True and correct
To the best of my knowledge.

Signature of Clerk of Bryan County Board of Commissioners



Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321
Phone: (912)653-3835

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-02446

SHIP TO

VENDOR

Vendor #: DISTR010

DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313

ORDER DATE: 05/02/17

DELIVERY DATE:

STATE CONTRACT:

F.O.B. TERMS:

VENDOR ACCT NUM:

VENDOR PHONE #:

VENDOR FAX #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 58-6002921

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	April 2017 Victim Witness	755-250-2200-57-2001	4,331.0600	4,331.06
		DISTRICT ATTORNEY CVW PROGRAM		
			TOTAL	4,331.06

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

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DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 3171

DESCRIPTION		AMOUNT
PO: 17-01856 DESC: January, February, March 2017 INV: JAN FEB, MAR 17 AMT: 14,378.48		14,378.48
VENDOR DISTRICT ATTORNEY VICTIM WITNE		CHECK DATE 04/06/17
		CHECK AMOUNT 14,378.48

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 3171

DESCRIPTION		AMOUNT
PO: 17-01856 DESC: January, February, March 2017 INV: JAN FEB, MAR 17 AMT: 14,378.48		14,378.48
VENDOR DISTRICT ATTORNEY VICTIM WITNE		CHECK DATE 04/06/17
		CHECK AMOUNT 14,378.48

Fax Date APR 07 2017
Sent Date _____

DETACH BEFORE DEPOSITING

THIS DOCUMENT HAS A COLORED BACKGROUND AND FLUORESCENT FIBERS • SEE ADDITIONAL SECURITY FEATURES ON REVERSE SIDE • MISSING A FEATURE INDICATES A COPY

BRYAN COUNTY

General Checking
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

First Bank of Coastal Georgia
P.O. Box 8
Pembroke, Ga 31321
64-684/612

NO. 3171

VOID AFTER 180 DAYS

DATE ISSUED
04/06/17

CHECK NO.
3171

CHECK AMOUNT
\$*****14,378.48

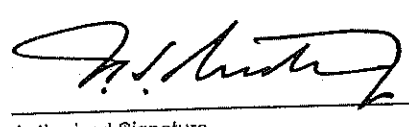
Fourteen Thousand Three Hundred Seventy Eight AND 48/100 Dollars

TO THE ORDER OF:

DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313

Authorized Signature


Denise M. Waters

Authorized Signature

BRYAN COUNTY BOARD OF COMMISSIONERS

PEMBROKE, GEORGIA January February March 20 17

PAID : WEEKLY _____ BI-WEEKLY _____ MONTHLY x

VENDOR # 4779

TO: DISTRICT ATTORNEY VICTIM WITNESS PROGRAM

945 E.G. MILES PARKWAY

HINESVILLE, GA. 31313

ITEM NUMBER	DESCRIPTION	AMOUNT
(755) 2200.250.97.2001	MONTHLY COLLECTIONS	
	GET AMOUNT FROM REPORT	
		14,378.48

BRYAN COUNTY GEORGIA

Having Examined the above against Bryan County and find it to be Just, True and correct
To the best of my knowledge.

Signature of Clerk of Bryan County Board of Commissioners

Crime Victims

01/01/2016	Superior Court	252.00
01/01/2016	State Court	2,801.13
01/01/2016	Magistrate Court	22.90
01/01/2016	Juvenile Court	4.84
01/01/2016	Pembroke	548.40
01/01/2016	Richmond Hill	1,885.70
		5,514.97

02/25/2016	Superior Court	234.50
02/25/2016	State Court	2,289.39
02/25/2016	Juvenile Court	20.40
02/11/2016	Pembroke	520.38
02/19/2016	Richmond Hill	1,549.74
		4,614.41

03/15/2016	Pembroke	826.14
03/15/2016	Richmond Hill	3,653.45
		4,479.59

04/07/2016	Superior Court	286.50
04/22/2016	Superior Court	62.50
04/07/2016	State Court	2,834.29
04/22/2016	State Court	3,034.82
04/22/2016	Magistrate Court	5.10
04/07/2016	Juvenile Court	21.99
04/22/2016	Juvenile Court	24.70
04/12/2016	Pembroke	921.17
04/20/2016	Richmond Hill	5,731.62
		12,922.69

05/18/2016	Superior Court	299.50
05/18/2016	State Court	2,814.06
05/18/2016	Juvenile Court	20.23
05/11/2016	Pembroke	744.49
05/16/2016	Richmond Hill	1,974.35
		5,852.63

06/17/2016	Superior Court	136.00
06/17/2016	State Court	3,816.21
06/17/2016	Juvenile Court	11.58
06/15/2016	Pembroke	531.92
06/15/2016	Richmond Hill	3,186.74
		7,682.45

07/26/2016	Superior Court	128.00
07/26/2016	State Court	3,077.13
07/26/2016	Magistrate Court	5.10

02/03/2016	2,434.10
02/29/2016	7,695.28
03/30/2016	4,479.59
04/27/2016	12,922.69
05/27/2016	5,852.63
06/29/2016	7,682.45
07/29/2016	7,207.02
	48,273.76

Crime Victims

07/26/2016	Juvenile Court	75.23
07/13/2016	Pembroke	627.59
07/13/2016	Richmond Hill	3,293.97
		7,207.02

48,273.76

08/10/2016	Pembroke	164.18
08/19/2016	Superior Court	95.86
08/19/2016	State Court	2,506.59
08/19/2016	Magistrate Court	5.10
08/19/2016	Juvenile Court	35.23
08/15/2016	Richmond Hill	2,693.89
		5,500.85

09/16/2016	Pembroke	622.63
09/16/2016	Richmond Hill	2,601.05
		3,223.68

10/17/2016	Superior Court	109.65
10/18/2016	Superior Court	71.36
10/17/2016	State Court	2,850.02
10/18/2016	State Court	2,432.45
10/18/2016	Juvenile Court	15.63
10/17/2016	Pembroke	746.20
10/21/2016	Richmond Hill	3,536.85
		9,762.16

08/31/2016	2,858.07
09/30/2016	5,866.46
10/26/2016	9,762.16
12/08/2016	449.57
02/01/2017	10,214.71
	29,150.97

11/29/2016	Superior Court	306.00
11/29/2016	State Court	2,518.61
11/29/2016	Juvenile Court	20.95
11/18/2016	Pembroke	428.62
		3,274.18

12/22/2016	Superior Court	227.23
12/22/2016	State Court	2,139.96
12/22/2016	Juvenile Court	9.30
12/15/2016	Pembroke	479.56
12/21/2016	Richmond Hill	2,685.58
		5,541.63

Still Owe

14,378.48

DMW

43,529.45

12/31/2016	Superior Court	38.59 ***
12/31/2016	Juvenile Court	24.07 ***
12/31/2016	State Court	2,318.65 ***
12/31/2016	Pembroke	503.54

Pay 14,378.48- ~~through~~
for funds received through 3-31-2017

Crime Victims

12/31/2016	Richmond Hill	1,344.93
		4,229.78
02/08/2017	Pembroke	783.54 ***
02/14/2017	Richmond Hill	3,295.36 ***
		4,078.90
03/23/2017	Superior Court	175.00 ***
03/03/2017	State Court	2,464.29 ***
03/23/2017	State Court	1,935.27 ***
03/23/2017	Magistrate Court	5.10 ***
03/03/2017	Juvenile Court	5.24 ***
03/23/2017	Juvenile Court	23.15 ***
03/07/2017	Pembroke	677.61 ***
03/10/2017	Richmond Hill	2,632.61 ***
		7,918.27
		43,529.45



Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321
Phone: (912)653-3835

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-01856

SHIP TO

VENDOR

Vendor #: DISTR010

DISTRICT ATTORNEY VICTIM WITNE

945 E G MILES PARKWAY
HINESVILLE, GA 31313

ORDER DATE: 03/31/17

DELIVERY DATE:

STATE CONTRACT:

F.O.B. TERMS:

VENDOR ACCT NUM:

VENDOR PHONE #:

VENDOR FAX #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 58-6002921

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	January, February, March 2017	755-250-2200-57-2001	14,378.4800	14,378.48
		DISTRICT ATTORNEY CVW PROGRAM		
			TOTAL	14,378.48

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties, of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 2204

DESCRIPTION		AMOUNT	
PO: 17-00510 DESC: NOV/DEC 2016 INV: NOV DEC 16 AMT: 10,214.71		10,214.71	
VENDOR DISTRICT ATTORNEYS OFFICE		CHECK DATE 02/01/17	CHECK AMOUNT 10,214.71

BRYAN COUNTY

RETAIN FOR YOUR RECORDS

NO. 2204

DESCRIPTION		AMOUNT	
PO: 17-00510 DESC: NOV/DEC 2016 INV: NOV DEC 16 AMT: 10,214.71		10,214.71	
Fax Date _____ Sent Date <u>FEB 02 2017</u>			
VENDOR DISTRICT ATTORNEYS OFFICE		CHECK DATE 02/01/17	CHECK AMOUNT 10,214.71

DETACH BEFORE DEPOSITING

THIS DOCUMENT HAS A COLORED BACKGROUND AND FLUORESCENT FIBERS • SEE ADDITIONAL SECURITY FEATURES ON REVERSE SIDE • MISSING A FEATURE INDICATES A COPY

BRYAN COUNTY
General Checking
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

First Bank of Coastal Georgia
P.O. Box 8
Pembroke, Ga 31321
64-684/612

NO. 2204

VOID AFTER 180 DAYS

DATE ISSUED
02/01/17

CHECK NO.
2204

CHECK AMOUNT
\$*****10,214.71

Ten Thousand Two Hundred Fourteen AND 71/100 Dollars

TO THE ORDER OF:
DISTRICT ATTORNEYS OFFICE
945 E.G. MILES PARKWAY
HINES VILLE, GA 31313

Authorized Signature

Authorized Signature

BRYAN COUNTY BOARD OF COMMISSIONERS

PEMBROKE, GEORGIA NOV & DEC 2017

PAID : WEEKLY _____ BI-WEEKLY _____ MONTHLY x

VENDOR # 4779

TO: DISTRICT ATTORNEY VICTIM WITNESS PROGRAM

945 E.G. MILES PARKWAY

HINESVILLE, GA. 31313

ITEM NUMBER	DESCRIPTION	AMOUNT
(755) 2200.250.57.2001	MONTHLY COLLECTIONS	
	GET AMOUNT FROM REPORT	
		10,214.71

BRYAN COUNTY GEORGIA

Having Examined the above against Bryan County and find it to be Just, True and correct
To the best of my knowledge.

Signature of Clerk of Bryan County Board of Commissioners

Range of Accounts: 755-00-35-1110 to 755-00-35-1172
Type: Revenue Activity Includes Accounts with Zero Activity: N
Subtotal DEPT: No Subtotal SOURCE: No

Account No Description	Total	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
755-00-35-1110 SUPERIOR COURT	1957.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1242.86	0.00	181.01	306.00	227.23
755-00-35-1120 STATE COURT	30313.53	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20372.49	0.00	5282.47	2518.61	2139.96
755-00-35-1130 MAGISTRATE COURT	15.30	0.00	0.00	0.00	0.00	0.00	0.00	0.00	15.30	0.00	0.00	0.00	0.00
755-00-35-1160 JUVENILE COURT	255.24	0.00	0.00	0.00	0.00	0.00	0.00	0.00	209.36	0.00	15.63	20.95	9.30
755-00-35-1171 CITY OF PEMBROKE	7116.42	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4335.87	622.63	746.20	428.62	983.10
755-00-35-1172 CITY OF RICHMOND HILL	32252.17	0.00	0.00	0.00	0.00	0.00	0.00	0.00	22083.76	2601.05	3536.85	0.00	4030.51
Fund Total	71909.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	48259.64	3223.68	9762.16	3274.18	7390.10
Grand Total	71909.76	0.00	0.00	0.00	0.00	0.00	0.00	0.00	48259.64	3223.68	9762.16	3274.18	7390.10
Count: 6													

Owe
\$10,214.71

Crime Victims

Range of Accounts: 755-00-35-1110	to 755-00-35-1172	Start Month: November	Start Year: 2016
Type: Revenue Activity	Includes Accounts with Zero Activity: N		Year To Date As Of: 01/26/17
Subtotal DEPT: No	Subtotal SOURCE: No		

[illegible]



Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321
Phone: (912)653-3835

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 17-00510

SHIP TO

VENDOR

Vendor #: DISTR015

DISTRICT ATTORNEYS OFFICE
945 E.G. MILES PARKWAY
HINES VILLE, GA 31313

ORDER DATE: 01/26/17
DELIVERY DATE:
STATE CONTRACT:
F.O.B. TERMS:
VENDOR ACCT NUM:
VENDOR PHONE #: (912) 876-4151
VENDOR FAX #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 58-6002921

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	NOV/DEC 2016	755-250-2200-57-2001	10,214.7100	10,214.71
		DISTRICT ATTORNEY CVW PROGRAM		
			TOTAL	=====
				10,214.71

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS
VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

Bryan County
51 N. Courthouse Street
P.O. Box 430
Pembroke, GA 31321

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT
IS SIGNED BELOW