

REQUEST TO ACCESS A GOVERNMENT RECORD

DATE: 9-17-12

TO: Kauai County Department of Finance

FROM: Joan Conrow
Name or Alias

Contact Information

Although you are not required to provide any personal information, you should provide enough information to allow the agency to contact you about this request. The processing of this request may be stopped if the agency is unable to contact you. Therefore, please provide any information that will allow the agency to contact you (name or alias, telephone or fax number, mailing address, e-mail address, etc.).

I WOULD LIKE THE FOLLOWING GOVERNMENT RECORD:

Describe the government record as specifically as possible so that it can be located. Try to provide a record name, subject matter, date, location, purpose, or names of persons to whom the record refers, or other information that could help the agency identify the record. A complete and accurate description of the government record you request will prevent delays in locating the record. Attach a second page if needed.

I am requesting:

All invoices submitted to and expenditures drawn from this account:

"Community Prosecution" 001-0401-513, 67-01

in the 2012 & 2013 fiscal year budgets for Office of the Prosecuting Attorney

I WOULD LIKE: (please check one or more of the options below)

- ☒ To inspect the government record.
- ☒ A copy of the government record: (Please check one of the options below.) See the back of this page for information about fees that you may be required to pay for agency services to process your record request. Note: Copying and transmission charges may also apply to certain options.
- ☐ Pick up at agency (date and time): _____
- ☐ Mail
- ☐ Fax (toll free and only if available)
- ☒ Other, if available (please specify): electronic file
- ☒ If the agency maintains the records in a form other than paper, please advise in which format you would prefer to have the record.
- ☒ Electronic ☐ Audio ☐ Other (please specify): _____
- ☒ Check this box if you are attaching a request for waiver of fees in the public interest (see waiver information on back).

SEE BACK FOR IMPORTANT INFORMATION

I am requesting a waiver of fees because this information:

- (1) pertains to the operations or activities of an agency;
- (2) The record is not readily available in the public domain; and
- (3) The requester has the primary intention and the actual ability to widely disseminate information from the government record to the public at large.

This request pertains to the operations or activities of an agency, this record is not readily available in the public domain, and as a professional journalist who writes a regular blog, Kauai Eclectic, I have the ability to widely disseminate information from the government record to the public at large.

FEES FOR PROCESSING RECORD REQUESTS

You may be charged fees for the services that the agency must perform when processing your record request, including fees for making photocopies and other lawful fees. **The first \$30 of fees charged for searching for a record, reviewing, and segregating will not be charged to you. Any amount over \$30 will be charged to you.** Fees are as follows:

Search for a Record	\$2.50 for 15 minutes
Review and Segregation of a Record	\$5.00 for 15 minutes

WAIVER OF FEES IN THE PUBLIC INTEREST

Up to \$60 of fees for searching for, segregating and reviewing records may be waived when the waiver would serve the public interest as described in section 2-71-32, Hawaii Administrative Rules. If you wish to apply for a waiver of fees in the public interest, you must attach to this request a statement of facts, including your identity as the requester, to show how the waiver of fees would serve the public interest. The criteria for this waiver, found at section 2-71-32, Hawaii Administrative Rules, are:

- (4) The requested record pertains to the operations or activities of an agency;
- (5) The record is not readily available in the public domain; and
- (6) The requester has the primary intention and the actual ability to widely disseminate information from the government record to the public at large.

AGENCY RESPONSE TO YOUR REQUEST FOR ACCESS

The agency to which you addressed your request must respond within a set time period. The agency will normally respond to you within 10 business days from the date it receives your request; however, in *extenuating circumstances* the agency must respond within 20 business days from the date of your request. If you have questions about the response time, you may contact the agency's UIPA contact person. If you are not satisfied with the agency's response, you may call the Office of Information Practices at 808-586-1400.

REQUESTER'S RESPONSIBILITIES

You have certain responsibilities under §2-71-16, Hawaii Administrative Rules. You may obtain a copy of these rules from the Lieutenant Governor's Office or from the Office of Information Practices. These responsibilities include making arrangements to inspect and copy records, providing further clarification or description of the requested record as instructed by the agency's notice, and making a prepayment of fees, if assessed.



101 Commerce St
PO Box 320
Oshkosh, WI 54901

www.4imprint.com

Toll Free 877-446-7746
Free Fax 800-355-5043

County Of Kauai Office Of Prosecuting Attorney
3990 Kaana Street Suite 210
LIHUE HI 96766

Shipping Address

Cyndie Johnson

County Of Kauai Office Of
Prosecuting Attorney
3990 Kaana Street Suite 210
LIHUE, HI 96766
USA
808-241-1727

Invoice Number 2129957

Account No.

2253908

Invoice Date July 18, 2011

Account Rep

Jon Thomas

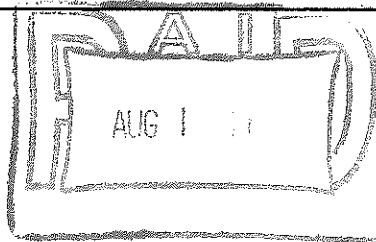
Your Order No.

Our Order No.

6002233

Item	Value Grocery Tote - 15" x 13"	Colors (Tote, Trim):	Orange, Orange
------	--------------------------------	----------------------	----------------

Qty	Item #	Description	Unit \$	Price\$	Total\$
500	106836-1513	Value Grocery Tote - 15" x 13"	1.2500	625.00	625.00
1	Set-Up Charg	Set-Up Charge	50.0000	50.00	50.00
		Freight		220.80	220.80
				Tax	0.00



Total Net 895.80

Grand Total 895.80

Total Due 895.80

8-8-11 on to pay \$ 895.⁸⁰

Oriental Trading Company, Inc.

Invoice #: 646079775-01
 Date: 8/11/2011
 Page #: 1

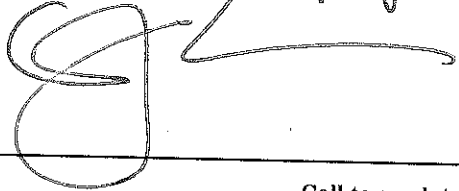
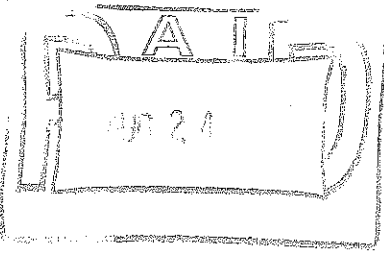
SOLD TO:

COUNTY OF KAUAI **
 4444 RICE ST STE 330
 LIHUE, HI 96766-1340

SHIP TO:

COUNTY OF KAUAI
 PROSECUTING ATTORNEY
 3990 KAANA ST STE 210
 LIHUE, HI 96766-1268

Purchase Order Number 183600		Date Ordered 8/10/2011	Date Shipped 8/11/2011	Back Orders NO	Terms NET 30 DAYS
Service Representative		Number of Cartons 1	Weight 13 LBS	Shipped Via	
Item Number	Qty Ordered	Qty. Shipped	Description	Unit Price	Ext. Amount
IN-25/5763	1 EA	1	CARNIVAL SPINNER GAME	20.00	20.00
AO-1/702025B-NP	1 PC	1	MAIN 2 DROP 1 CATALOG		
AO-1/AUG12BB-NP	1 PC	1	AUGUST BOUNCEBACK		
AO-1/702026A-NP	1 PC	1	AWARENESS BOUNCEBACK		
AO-1/702116A-NP	1 PC	OUT	TEAM SPIRIT BOUNCEBACK		OUT

8/17/11 ok to pay \$44.95



Call to speak to a customer service representative: 1-800-228-0475

Merchandise	Shipping & Handling	Sales Tax	Total Amount	Certificate/Other	Payments	Balance Due
20.00	24.95		44.95			44.95

VV PLEASE DETACH AND RETURN WITH REMITTANCE VV



PO BOX 520
Oshkosh, WI 54901

www.4imprint.com

Toll Free 877-446-7746
Free Fax 800-355-5043

ATTENTION: DEPT OF FINANCE
COUNTY OF KAUAI OFFICE OF PROSECUTING ATTORNEY
C/O COUNTY OF KAUAI
4444 RICE STREET
ROOM 303
LIHUE HI 96766

Shipping Address

Cyndie Johnson
County of Kauai/Pros Attorney
3990 Kaana Street, Ste 210
LIHUE, HI 96766
USA
Tel: 808-241-1727

Invoice Number 2155541

Invoice Date August 12, 2011

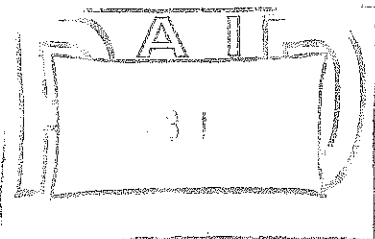
Your Order No. 183502

Account No. 2253908

Account Rep. Matt Mugerauer

Our Order No. 6071577

Item Power Clip - Translucent - 24 hr			Colors (Clip,Grip): Translucent Orange, Black		
Qty	Item #	Description	Unit \$	Price \$	Total \$
750	2245-T-24HR	Power Clip - Translucent - 24 hr	0.7200	540.00	540.00
1	Set-Up Charge	Set-Up Charge	55.0000	55.00	55.00
1	Delivery	24 hr Rush Service	40.0000	40.00	40.00
1	Discounts	24 hr VIP Discount	-40.0000	-40.00	-40.00
		Freight		269.94	269.94



Total Net 864.94
Total Tax 0.00
Grand Total 864.94
Total Due 864.94

Please ensure that payment is received by Sep 11 2011.

Thank You! We appreciate your business.

Any overruns you may have received are yours with our compliments.

- To insure proper credit to your account, please quote "2155541/2253908" on your check or remittance.
- If you are not satisfied with your order, please call 1-800-300-0764. All claims must be made within 5 days of receipt.
- Any questions regarding your invoice? Please call 1-800-982-8979. Our terms are Net 30.
- Please make checks payable to 4imprint

4imprint Federal ID #39-1837105, GSA Contract # GS-07F-9626S. A Late Payment Charge based on maximum annual percentage allowed by your state law will be applied to this balance owed under this invoice when the invoice becomes past due. The purchaser agrees to pay all of the company's reasonable attorney's fees and any collection agency fees incurred in the collection of any amount owed hereunder and not paid when due. Purchaser agrees to pay any sales or use tax. No credit will be issued for returned merchandise without our consent. This invoice is a conditional acceptance by the seller of the buyer's offer to purchase seller's goods. It may contain terms which differ from or add to those contained in the buyer's purchase order, and to the extent that this is the case, the seller hereby expressly conditions its acceptance of the buyer's offer on the buyer's assent to the additional or different terms. The buyer's receipt and retention of the goods covered by this invoice constitutes acceptance of any such additional or different terms. The buyer and seller agree that any contract hereby entered into has been made and is to be construed according to our State Law.

Please visit our website - www.4imprint.com

Please Remit to:
4imprint, Inc.
25303 Network Place
Chicago, IL 60673-1253

Please Note Our
New Remittance
Address

TJM Promotions, Inc.

6041 SW 54th Street

Unit 200

Ocala, FL 34474

Invoice

Date	Invoice #
8/9/2011	8772

Bill To
County of Kauai Lianne Parongao 444 Rice Street Room 303 Lihue, Kauai, HI 96766

Ship To
County of Kauai Prosecuting Attorney6 3990 Kaana St Suite 210 Lihue, HI 96766

NLT	FFO	P.O. Number	Terms	PromoCode	Rep	Tracking #
	JX	183628	Net 30		820	

Quantity	Item Code	Description	Price Each	Class	Amount
2,000	73120	202mm Printed Debossed Wristbands	0.27	SB	540.00
<div><p><i>8/23/11 On to pay \$540.00</i></p><p><i>[Signature]</i></p><p>PAID</p></div>					

Total	\$540.00
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Phone #	800-423-0449
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inkspot

QUALITY PRINTING Corp.

(808) 246-0147 • FAX 246-0283
email: print@inkspotkauai.com
4100 Rice Street #10 • Lihue, HI 96766

INVOICE

80087

DATE Aug 15, 2011

P.O. NO. 183809

PROOF Mon

DUE Tue/Wed.

S O L D T O	COMPANY	County of Kauai
	CONTACT	Prosecuting Attorney
	ADDRESS	Dance
	PHONE	2411758

ITEM	QUANTITY ORDERED	DESCRIPTION	UNIT PRICE	AMOUNT DUE
1	1	Pohaku Banner 2ft x 4ft 1 side White Vinyl Weatherproof	1	
2	1	Logo Gally to replace (1) banner -customer call apply	2	NO charge!
3	1	Set new		

8/29/11 on to pay \$61.46

Print Name Donna H. Pungas Date 08/24/11
Signature _____ Date _____

TYPE OF PAYMENT:
☐ CASH
☐ CHECK: # _____
☐ CREDIT CARD _____
☐ DEPOSIT _____
☐ OTHERS _____

☐ Partial ☐ Pick-Up ☐ Delivered Date _____

TERMS: Payment due upon receipt. 1 1/2% of outstanding balance service fee will be charged per month to balances over 30 days.

SUBTOTAL	Col 46
TAX	Col 1
TOTAL	Col 46
PAYMENT RECEIVED	
TOTAL NOW DUE	

ARTWORK

- ☐ Halftones _____ Received: _____
☐ Set New _____
☐ Revise _____
☐ Proof Out _____
☐ Proof In _____
☐ Materials Received _____
☐ Materials Returned _____

Distribution White: Customer Canary: Accounting/Records

OFFSET

☐ One Side ☐ Two Sided, Head to _____ ☐ Sample enclosed
 Operator Item # Ink (front) Ink (back) #Up Sheet Size Press Sheets Press Count

BINDERY

- ☐ Fold To/Type _____
☐ Pad _____ Sheets per pad _____
☐ 1 Hole Drill ☐ 2 Hole Drill ☐ 3 Hole Drill ☐ Comb Binding ☐ Other _____
☐ Number _____

KAUAI Printing Solutions Inc.

2950 KRESS STREET, STE D • LIHUE, HI 96766
(808) 245-2670 • (808) 245-8074

7-13149
invoice

6745

SOLD TO

Office of the Prosecuting Attorney

JOB #:

PURCHASE ORDER #: 183907

PHONE: 241-1868

ORDERED BY:

Kenec

X

ORDER RECEIVED BY

Sam H. Paurogat

INVOICE DATE

8/23/11

QUANTITY

DESCRIPTION

UNIT PRICE

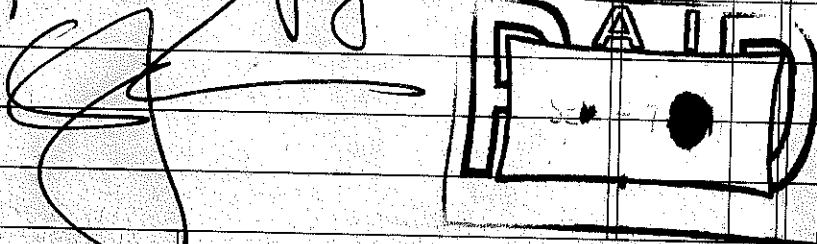
AMOUNT

1000

Pohaku Brochures

250.00

8/29/11 due to pay \$ 260.40



TERMS: NET 10 Days from date of invoice with approved credit. Interest at the rate of 1.5% per month (18% per annum) will be charged on all Past Due Accounts.

ACCOUNTS that are PAST DUE will lose credit privileges and will be placed on COD.

PLEASE PAY FROM THIS INVOICE.
NO STATEMENTS WILL BE SENT.

Deposit Rec'd

sub total

250.00

Balance Due

4.16% tax

10.40

AMOUNT DUE

260.40

ORIGINAL INVOICE

L. Moriguchi, Inc., dba SIGN art

3-3586 Kuhio Hwy., Suite 2
Lihue, HI 96766
Ph.246-6812 F245-8797
Lic. # C-23257

8/24/2011

Bill To

County of Kauai
Prosecuting Attorney
3990 Kaana Street, Suite 210
Lihue, HI 96766
Ranee Layosa 241-1752

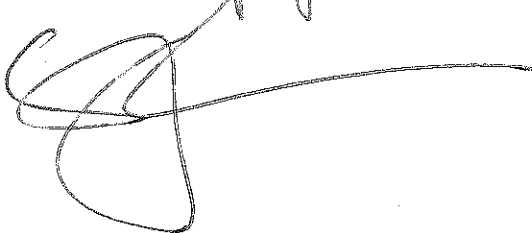
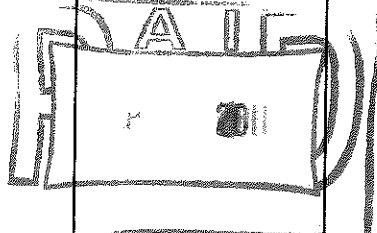
P.O. No.

Terms

Project

183842

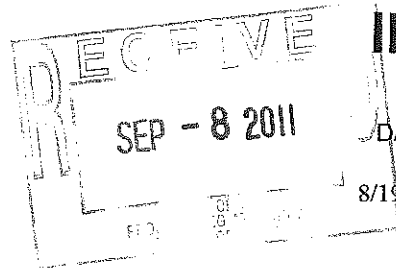
due on receipt

Quantity	Description	Rate	Amount
2	2'x6' banner	140.00	280.00
2	Econo Banner Stand	92.48	184.96
	Subtotal		464.96
	Sales Tax	4.00%	18.60
<p>8/29/11 on to pay \$ 483.⁵⁶</p>  			
Thank you for your business. We appreciate referrals.			Total \$483.56



&PRINT MACHINE

141 KUHIO HIGHWAY * KAPAA, KAUAI, HAWAII 96746
(808)823.0869 * FAX (808)822.3624



INVOICE

DATE
8/19/2011

INVOICE #
17967

BILL TO

COUNTY OF KAUAI
Office of the Prosecuting Attorney
3990 Kaana Street, Suite 210
Lihue, Hawaii 96766
Ranee Layosa

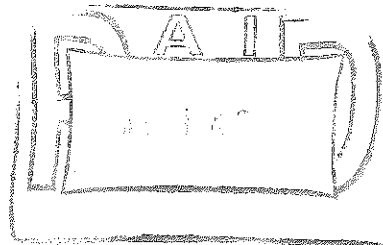
SHIP TO

P.O. NO.

SHIP VIA

183842

QTY	DESCRIPTION	RATE	AMOUNT
1	3' x 8' BANNER Black OC - VersaCamm Print on 3691 Logos	162.00	162.00T
	DISCOUNT To Match P.O.	-0.01	-0.01



9/8/11 ok to pay \$168.74

NUMBER OF PIECES:

DATE RECEIVED:

RECEIVED BY:

Subtotal

\$161.99

Sales Tax (4.166%)

\$6.75

Total

\$168.74

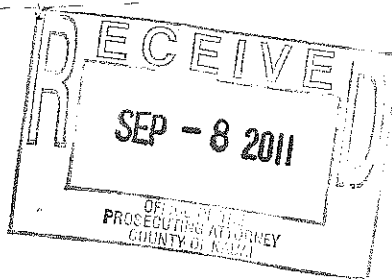
Please pay from this invoice no statement will be sent. Late payment fee will be charged on all invoices past 30 days of pick up. (\$35 if balance is \$1,000 +, \$25 if balance is \$50 - \$999, \$10 if balance is less than \$50) Return payment fee of \$25 will be charged. Balance subject to 5% finance charge at end of 30 days.

CUSTOMER
COPY



**Sign & Print
inc. MACHINE**

1191 KUHIO HIGHWAY * KAPAA, KAUAI, HAWAII 96746
(808) 823.0869 * FAX (808) 822.3624



INVOICE

DATE 8/18/2011 INVOICE # 17957

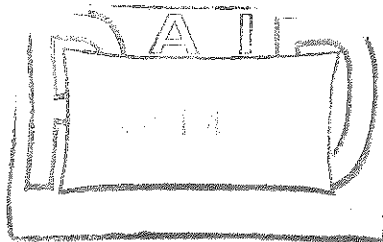
BILL TO

COUNTY OF KAUAI
Office of the Prosecuting Attorney
3990 Kaana Street, Suite 210
Lihue, Hawaii 96766
Ranee Layosa

SHIP TO

P.O. NO. 183810 SHIP VIA

QTY	DESCRIPTION	RATE	AMOUNT
1,000	RALLY FANS Item 616 - 8-1/8" x 7 1/4" - 6-ply All Weather Poster Board #18 Pumpkin Orange Background & Black Copy	1.05	1,050.00T
1,000	DECALS 1 1/2" x 2" Black Printing on Pastel Orange OC - Die Cut	0.25	250.00T



9/8/11 on to pay \$ 1354.¹⁶
[Signature]

NUMBER OF PIECES:

DATE RECEIVED:

RECEIVED BY:

Subtotal \$1,300.00
Sales Tax (4.166%) \$54.16
Total \$1,354.16

Please pay from this invoice no statement will be sent. Late payment fee will be charged on all invoices past 30 days of pick up. (\$35 if balance is \$1,000 +, \$25 if balance is \$50 - \$999, \$10 if balance is less than \$50) Return payment fee of \$25 will be charged. Balance subject to 5% finance charge at end of 30 days.

**CUSTOMER
COPY**

MARCO

Promote Smart. IT'S EASY!™

MARCO
2640 Commerce Drive
Harrisburg, PA 17110
ph. 800-232-1121 fax 866-545-5672
Accounting@MarcoPromotionalProducts.com

Invoice

Account Number: 7315632

Invoice Number: 231941

Bill To:

Invoice Date: 9/30/2011

Cyndie Johnson
County of Kauai Prosecuting Attorneys
3990 Kaana St Ste 210
Lihue, HI 96766

Ship To:

Terms: Net 10

Cyndie Johnson
County of Kauai Prosecuting Attorneys Of
3990 Kaana St Ste 210, ,
Lihue, HI 96766

Your Purchase

Order#
184623

MARCO Order#
260412

Sales Representative
Annie Campbell
Annie.Campbell@MarcoPromotionalProducts.com

Quantity	SKU	Product Description	Price	Subtotal
Products/Charges				
750	WI-1039	Zumba Pen	\$0.38	\$285.00
1	S134	Setup Charge (per color/location)	\$15.00	\$15.00
1	ARTR-First Free	First Art Revision - FREE	\$0.00	\$0.00
1	Freight	Shipping and Handling	\$72.31	\$72.31

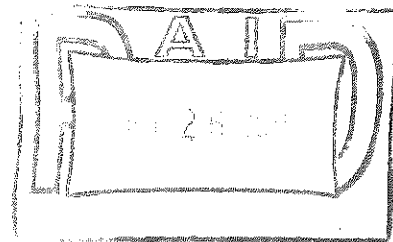
Products/Charges Total

\$372.31

Amount Due

\$372.31

10/17/11 on to pay \$ 372.³¹



All claims must be made within 10 days after receipt of shipment. Returns will not be accepted without our permission. By accepting merchandise customer agrees to pay all collection costs including any attorney's fee if such are required.

Remit to Address:
Accounts Receivable
MARCO
2640 Commerce Drive
Harrisburg, PA 17110
MARCO EIN# 20-2018013

Credit Card Payment Form

Card# _____ Exp Date: _____
Cardholder _____ Sec Code: _____
Address: _____
For your convenience MARCO Accepts American Express, MasterCard and Visa. Credit Card payments can be faxed to us at 866-545-5672.

inkspot

QUALITY PRINTING Corp.

(808) 246-0147 • FAX 246-0283
email: print@inkspotkauai.com
4100 Rice Street #10 • Lihue, HI 96766

INVOICE

80306

Sept 9, 2011

DATE

184518

P.O. NO.

9/21/11 or 9/22/11

PROOF

DUE

S O L D T O	COMPANY	County of Kauai.	
	CONTACT	Office of the Prosecuting Attorney	
	ADDRESS	Rance Layosa	
	PHONE	241-1752	FAX/E-MAIL 241-1758

10/03/11
(commission)
9.24-11 2m/21

ITEM	QUANTITY ORDERED	DESCRIPTION	UNIT PRICE	AMOUNT DUE
1)	1250 total	Business cards 2x3 1/2 1 sided full color 80# st. Mohawk (100# D50) 1) Shaylene Iseri-Carvalho 2) Erin J. Wilson 3) Wendel D. Crutchfield 4) Lance S. Kobashigawa * 5) Lianne H. Parongao Set as needed / fcopy output		
		Star upgrade to 100# st. no add'l charge!		
		10/17/11 copy 196.85		
		Art		

Print Name Lianne H. Parongao Date _____

Signature [Signature] Date _____

☒ Partial ☐ Pick-Up ☐ Delivered Date _____

TYPE OF PAYMENT:

- ☐ CASH
☐ CHECK: # _____
☐ CREDIT CARD _____
☐ DEPOSIT _____
☐ OTHERS _____

SUBTOTAL

189-

TAX

7.88

TOTAL

196.88

PAYMENT RECEIVED

196.85

TOTAL NOW DUE

TERMS: Payment due upon receipt. 1 1/2% of outstanding balance service fee will be charged per month to balances over 30 days.

ARTWORK

- ☐ Halftones _____ Received: _____
- ☐ Set New _____
- ☐ Revise _____
- ☐ Proof Out _____
- ☐ Proof In _____
- ☐ Materials Received _____
- ☐ Materials Returned _____

Distribution White: Customer Canary: Accounting/Records

OFFSET

<input type="radio"/> One Side	<input type="radio"/> Two Sided, Head to _____	<input checked="" type="radio"/> Sample enclosed					
Operator	Item #	Ink (front)	Ink (back)	#Up	Sheet Size	Press Sheets	Press Count
G	1	Color	0	24	12x18	11	13
G	2	Color	0	6	11x17	42	43

BINDERY

- ☐ Fold To/Type _____ Stitch: ☐ Saddle ☐ Side
- ☐ Pad _____ Sheets per pad _____ Edge ☐ Laminate _____
- ☐ 1 Hole Drill ☐ 2 Hole Drill ☐ 3 Hole Drill ☐ Comb Binding ☐ Other _____
- ☐ Number _____ to _____ ☐ Collate ☐ Perforate



Invoice 2205876

Page 1

101 Commerce St
PO Box 320
Oshkosh, WI 54901

www.4imprint.com

Toll Free 877-446-7746
Free Fax 800-355-5043

ATTENTION: DEPT OF FINANCE
COUNTY OF KAUAI OFFICE OF PROSECUTING ATTORNEY
C/O COUNTY OF KAUAI
4444 RICE STREET
ROOM 303
LIHUE HI 96766

Shipping Address

Cyndie Johnson
County Of Kauai Office Of Prosecuting Attorney
3990 Kaana Street
Suite 210
LIHUE, HI 96766
USA
Tel: 808-241-1727

Invoice Number 2205876

Account No. 2253908

Invoice Date September 28, 2011

Account Rep. Kimberly Arneson

Your Order No. 184517

Our Order No. 6213534

Item	Value Grocery Tote - 15" x 13"	Colors (Tote, Trim): Orange, Orange	Qty	Item #	Description	Unit \$	Price \$	Total \$
750	106836-1513	Value Grocery Tote - 15" x 13"	1.2200				915.00	915.00
		Freight					329.88	329.88

Total Net 1,244.88
Total Tax 0.00
Grand Total 1,244.88
Total Due 1,244.88

Please ensure that payment is received by Oct 28 2011.

Thank You! We appreciate your business.
Any overruns you may have received are yours with our compliments.

- To insure proper credit to your account, please quote "2205876/2253908" on your check or remittance.
- If you are not satisfied with your order, please call 1-800-300-0764. All claims must be made within 5 days of receipt.
- Any questions regarding your invoice? Please call 1-800-982-8979. Our terms are Net 30.
- Please make checks payable to 4imprint

4imprint Federal ID #39-1837105, GSA Contract # GS-07F-9626S. A Late Payment Charge based on maximum annual percentage allowed by your state law will be applied to this balance owed under this invoice when the invoice becomes past due. The purchaser agrees to pay all of the company's reasonable attorney's fees and any collection agency fees incurred in the collection of any amount owed hereunder and not paid when due. Purchaser agrees to pay any sales or use tax. No credit will be issued for returned merchandise without our consent. This invoice is a conditional acceptance by the seller of the buyer's offer to purchase seller's goods. It may contain terms which differ from or add to those contained in the buyer's purchase order, and to the extent that this is the case, the seller hereby expressly conditions its acceptance of the buyer's offer on the buyer's assent to the additional or different terms. The buyer's receipt and retention of the goods covered by this invoice constitutes acceptance of any such additional or different terms. The buyer and seller agree that any contract hereby entered into has been made and is to be construed according to our State Law.

Please visit our website - www.4imprint.com

Please Remit to:
4imprint, Inc.
25303 Network Place
Chicago, IL 60673-1253

Please Note Our
New Remittance
Address

10/17/11 ok to pay \$ 1244.88



www.4imprint.com

Toll Free 877-446-7746
Free Fax 800-355-5043

ATTENTION: DEPT OF FINANCE
COUNTY OF KAUAI OFFICE OF PROSECUTING ATTORNEY
C/O COUNTY OF KAUAI
3990 KAANA ST
STE 210
LIHUE HI 96766

Shipping Address

Lianne Parongao
County Of Kauai Office Of Prosecuting Attorney
3990 KAANA ST
STE 210
LIHUE, HI 96766-1268
USA
Tel: 8082411745

Invoice Number 2439049

Account No. 2253908

Invoice Date May 29, 2012

Account Rep. Toni Cheskie

Your Order No. 199784

Our Order No. 6790462

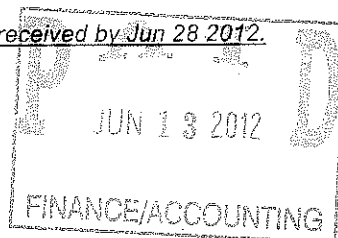
Item		Latitudes Foldaway Shopper				Colors (Tote,Trim): Black, Black	
Qty	Item #	Description	Unit \$	Price \$	Total \$		
700	107514	Latitudes Foldaway Shopper	2.8000	1,960.00	1,960.00		
1	Set-Up Charge	Set-Up Charge	0.0000	0.00	0.00		
		Freight		150.52	150.52		
					2,110.52		

Item		Whistle Key Light				Colors (Keylight,Split Ring): Orange, Silver	
Qty	Item #	Description	Unit \$	Price \$	Total \$		
500	6900	Whistle Key Light	0.7700	385.00	385.00		
1	Set-Up Charge	Set-Up Charge	55.0000	55.00	55.00		
1	Discounts	Marketing Discount	-25.0000	-25.00	-25.00		
		Freight		55.56	55.56		
					470.56		

Item		Swanky Pen - Designer Tie Clip				Colors (Barrel/Plunger,Clip): Orange, Zebra Stripes	
Qty	Item #	Description	Unit \$	Price \$	Total \$		
500	103698-TC	Swanky Pen - Designer Tie Clip	0.7700	385.00	385.00		
1	Set-Up Charge	Set-Up Charge	0.0000	0.00	0.00		
		Freight		56.20	56.20		
					441.20		

Total Net 3,022.28
Total Tax 0.00
Grand Total 3,022.28
Total Due 3,022.28

Please ensure that payment is received by Jun 28 2012.



okay to pay 6/04/12
Jmmidell