

WP 23 #4

CITY LAND BANK'S DISBURSEMENT REQUEST AND AFFIDAVIT  
(To be delivered to County Land Bank before each Work Plan Disbursement)

1. PROJECT: Work Plan 2023
2. PREMISES: City of Erie, Erie County, Pennsylvania
3. ~~PERIOD TO:~~ March 31, 2023
4. TOTAL WORK PLAN AMOUNT: **\$589,500.00**

The Undersigned, the authorized representative of Erie Land Bank (the "City Land Bank"), having made due investigation as to the matters set forth in this Request and Affidavit (sometimes referred to herein as "Disbursement Request") and to induce Erie County Land Bank ("County Land Bank") to make the Current Work Plan Disbursement Request as set forth on line 6 above to City Land Bank pursuant to the terms of the Cooperation Agreement dated November 29, 2018, and subsequent Work Plan II, approved by the County Land Bank November 15, 2022, (collectively the "Work Plan Agreement") and in conjunction with the attached receipts, invoices or such other form of supporting documentation as is acceptable to the County Land Bank, after being duly sworn, does depose and state:

1. Work Plan Disbursement Request. City Land Bank hereby requests that the County Land Bank make a Disbursement on the Work Plan in the amount of the Current Work Plan Disbursement Request as set forth on line 6 above and does hereby represent and certify to the County Land Bank that the City Land Bank is entitled to receive such Current Work Plan Disbursement Request under the terms of the Work Plan Agreement.

2. Representations and Warranties. All representations and warranties contained in the Work Plan Agreement and the other documents executed and delivered pursuant to the Work Plan Agreement (collectively with the Work Plan Agreement, the "Work Plan Documents") are true and accurate in all material respects as of the date of this Agreement.

3. No Event of Default. No Event of Default exists under any Work Plan Documents, and no event or condition has occurred and is continuing or existing, or would result from the Disbursement about to be made, which, with the lapse of time or the giving of notice, or both, would constitute such an Event of Default.

4. Performance Continuous. Performance of the Work on the Project has been carried on with reasonable dispatch and has not been discontinued at any time for reasons within the control of City Land Bank.

5. Work on Schedule. The Work is progressing in such manner so as to insure completion of the Work in substantial accordance with the Work Plan on or before the Project Completion Date.

6. Disbursements Applied to Work Plan Costs. All funds received from County Land Bank previously as Disbursements under the Work Plan Agreement have been expended (or are being held in trust) for the sole purpose of paying costs of the scope of the Work Plan ("Costs") previously certified to County Land Bank in Disbursement Requests. No part of said funds has been used, and the funds to be received pursuant to this Disbursement Request shall not be used, for any other purpose. No item of Costs previously certified to County Land Bank in a Disbursement Request remains unpaid as of the date of this Affidavit.

7. Statements Truthful; Costs Accurate; Disbursements to Pay Costs. All of the statements and information set forth in the Disbursement Request being submitted to County Land Bank with this affidavit are true and correct in every material respect at the date of this affidavit. All Costs certified to County Land Bank in this Disbursement Request accurately reflect the precise amounts due. Where such Costs have not yet been billed to City Land Bank, they accurately reflect City Land Bank's best estimates of the amounts that will become due and owing during the period covered by the Disbursement Request. All the funds to be received pursuant to this Disbursement Request shall be used solely for the purposes of paying the items of Cost specified in this Disbursement Request or for reimbursing City Land Bank for such items previously paid by City Land Bank.

8. No Impairment of City Land Bank's Ability to Perform. Nothing has occurred which has or may substantially and adversely impair the ability of City Land Bank to meet its obligations under the Work Plan Documents.

9. No Prior Work Plan Requisition for Expenses. None of the items of expense specified in this Disbursement Request submitted with this Affidavit have previously been made the basis of any Disbursement Request by City Land Bank or of any payment by County Land Bank.

10. Aggregate Cost of Completion of Project. The estimated aggregate cost of completing the Project is \$410,000.00.

11. All Preconditions to Disbursement Have Been Satisfied. All conditions to the Disbursement which is to be made in accordance with this Disbursement Request (in addition to those conditions to which reference is made in this Work Plan Disbursement Request) have been met in accordance with the terms of the Work Plan Agreement.

12. Terms. The capitalized terms used in this Disbursement Request and Affidavit, not otherwise defined herein, have the meaning given to them in the Work Plan Agreement. This affidavit is subject to and incorporates the terms of the Work Plan Agreement.

Witness:



ERIE LAND BANK

By:   
Title: Executive Director

Sworn to before me this 24 day  
of April, 2023.

  
Notary Public

(SEAL)

Commonwealth of Pennsylvania - Notary Seal  
Cynthia Marie Johnson, Notary Public  
Erie County  
My commission expires April 5, 2026  
Commission number 1418466

Member, Pennsylvania Association of Notaries

**FINANCIAL REPORTING  
ERIE LAND BANK**

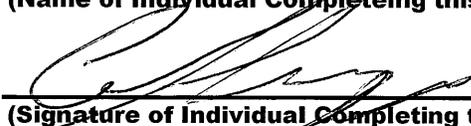
WP23 #4

<b>Grant Agreement Number:</b>		<b>WORK PLAN 2023</b>			
<b>Grant Organization:</b>		<b>Erie Land Bank</b>			
<b>Report Period:</b>		<b>3/31/2023</b>			
<b>BUDGET CATEGORIES*</b>	<b>G/L #</b>	<b>NEGOTIATED BUDGET</b>	<b>APPROVED DRAWDOWNS THIS PERIOD*</b>	<b>CUMULATIVE DRAWDOWNS TO DATE*</b>	<b>AVAILABLE BALANCE</b>
1. RACE Administration & Staffing	6000	95,000.00	6,995.42	0.00	95,000.00
2. Demolition	6836	0.00		0.00	0.00
3. Tax Sale Acquisition	6837	33,000.00		3,250.00	29,750.00
4. Condemnation/Acquisition	6838	78,000.00	1,625.00	5,417.47	72,582.53
5. Seasonal Maintenance	6840	27,000.00		0.00	27,000.00
6. Board & Seal	6841	32,500.00		0.00	32,500.00
7. Trash Removal / Clean	6842	24,000.00		0.00	24,000.00
8. Rehabilitation	6843	40,000.00		0.00	40,000.00
9. Environmental Abatement	6844	40,000.00		0.00	40,000.00
10. Professional Legal Fees	6201	12,000.00		0.00	12,000.00
11. Professional Services	6206	6,000.00		0.00	6,000.00
12. Utilities	6460	0.00		0.00	0.00
13. Software/Equipment	6430	12,000.00	249.12	10,506.09	1,493.91
14. Audit	6200	5,000.00		0.00	5,000.00
15. Office Supplies	6400	6,800.00		0.00	6,800.00
16. Travel	6103	4,000.00	353.86	0.00	4,000.00
17. Postage	6401	1,000.00		0.00	1,000.00
18. Advertising	6403	1,500.00		0.00	1,500.00
19. Education / Meetings	6101	3,500.00		0.00	3,500.00
20. Insurance	6300	7,000.00		879.55	6,120.45
21. Memberships/Subscriptions	6402	1,200.00		0.00	1,200.00
<b>10. TOTALS*</b>		<b>429,500.00</b>	<b>9,223.40</b>	<b>20,053.11</b>	<b>409,446.89</b>

I certify that all expenditures reported (or payment requested) are for appropriate purposes and in accordance with the provisions of the application and award documents.

**Aaron Snippet, Executive Director**

(Name of Individual Completing this Form)



(Signature of Individual Completing this Form)

4/18/23

# INVOICE

Erie Land Bank  
626 State Street, Room 107  
Erie, PA 16501

adecker@redeveloperie.org



## Erie County Land Bank

### Bill to

Erie County Land Bank  
150 East Front Street  
Erie, PA 16507

### Invoice details

Invoice no.: 1068  
Invoice date: 04/18/2023  
Terms: Net 30  
Due date: 05/18/2023

Product or service	Amount
1. <b>11 Admin Fees</b> PPE 03252023	\$1,656.17
2. <b>11 Admin Fees</b> PPE 04082023	\$5,339.25
3. <b>11 Condemnation Acquisition</b> Bill Schaaf & Associates_163 Brighton Ave	\$325.00
4. <b>11 Condemnation Acquisition</b> Bill Schaaf & Associates_2712 East Ave	\$325.00
5. <b>11 Condemnation Acquisition</b> Bill Schaaf & Associates_353-55 W 3rd	\$325.00
6. <b>11 Condemnation Acquisition</b> Bill Schaaf & Associates_306-308 Sassafras	\$325.00
7. <b>11 Condemnation Acquisition</b> Bill Schaaf & Associates_207 W 3	\$325.00
8. <b>11 Software/Equipment</b> Werkbot April 2023	\$79.00
9. <b>11 Software/Equipment</b> Hagan Business Machines_1/5 monthly billing for copy prints	\$69.70
10. <b>11 Software/Equipment</b> Toshiba Financial Services_1/8 copier rental	\$42.12
11. <b>11 Software/Equipment</b>	\$58.30

ELB QBO

12. 11 Travel

\$353.86

Hampton Inn & Suites Pittsburgh\_Snippert, Kiehl, Huff Westmoreland Blight Summit lodging

Total

**\$9,223.40**

Employee	Hourly Rate	Dental	STD	Life Ins	Vision	Medical	457(b) ER	Salary	Base Rate	Subtotal	Hours	Subtotal	Total w/PTO
Cook, Holly	\$ 35.342	266.40	292.56	74.52	52.44	9,036.12	2,100.00	\$52,500.00	\$28.85	\$ 64,322.04	0	\$ -	\$ -
Davis, Tracy	\$ 28.775	266.40	299.40	76.32	52.44	9,036.12	1,640.00	\$41,000.00	\$22.53	\$ 52,370.68	2	\$ 57.55	\$ 57.55
Decker, April	\$ 45.045	266.40	479.64	75.84	52.44	9,036.12	2,772.00	\$69,300.00	\$38.08	\$ 81,982.44	18	\$ 810.82	\$ 810.82
Huff, Jacob	\$ 29.332	266.40	306.84	43.32	52.44	9,036.12	1,680.00	\$42,000.00	\$23.08	\$ 53,385.12	50	\$ 1,466.62	\$ 1,466.62
Johnson, Cynthia	\$ 29.767	266.40	381.48	238.80	52.44	9,036.12	1,700.00	\$42,500.00	\$23.35	\$ 54,175.24	15	\$ 446.50	\$ 446.50
Kiehl, Mindy	\$ 36.810	266.40	350.16	88.80	52.44	9,036.12	2,200.00	\$55,000.00	\$30.22	\$ 66,993.92	30	\$ 1,104.30	\$ 1,840.49
Martino, Luanne	\$ 34.048	266.40	376.56	235.56	52.44	9,036.12	2,000.00	\$50,000.00	\$27.47	\$ 61,967.08	0	\$ -	\$ -
Otteni, Pat	\$ 34.374	266.40	413.88	291.48	52.44	9,036.12		\$52,500.00	\$28.85	\$ 62,560.32	0	\$ -	\$ -
Schaefer, David	\$ 31.708	266.40	477.72	376.32	52.44	9,036.12		\$47,500.00	\$26.10	\$ 57,709.00	0	\$ -	\$ -
Snippert, Aaron	\$ 57.612	0.00	379.20	99.00	152.16	25,210.560	5,512.500	\$73,500.00	\$40.38	\$ 104,853.42	21	\$ 1,209.85	\$ 1,254.66
Wilson, Kendra	\$ 14.00								14.00		0	\$ -	\$ -

\$ 376.81

\$ 660,319.26

136 \$ 5,095.63

\$ 5,876.64

Employee	Hourly Rate	PTO Hours	% of time	Total
Cook, Holly	35.34	0.00	0.00	\$ -
Davis, Tracy	28.78	0.00	2.86	\$ -
Decker, April	45.05	0.00	25.71	\$ -
Huff, Jacob	29.33	0.00	71.43	\$ -
Johnson, Cynthia	29.77	0.00	21.43	\$ -
Kiehl, Mindy	36.81	28.00	71.43	\$ 736.20
Martino, Luanne	34.05	0.00	0.00	\$ -
Otteni, Pat	34.37	0.00	0.00	\$ -
Schaefer, David	31.71	0.00	0.00	\$ -
Snippert, Aaron	57.61	2.50	31.11	\$ 44.81

\$ 781.01

WP 2022 \$4,220.47  
 WP 2023 \$ 1,656.17

RACE BIWEEKLY TIME REPORT  
REVISED 8/14/09  
GRANT/ PROGRAM

EMPLOYEE NAME: Davis, Tracy

EMPLOYEE SIGNATURE



	3/12/23 SUN	3/13/23 MON	3/14/23 TUE	3/15/23 WED	3/16/23 THU	3/17/23 FRI	3/18/23 SAT	3/19/23 SUN	3/20/23 MON	3/21/23 TUE	3/22/23 WED	3/23/23 THU	3/24/23 FRI	3/25/23 SAT	TOTAL
CDBG HOUSING REHAB- SINGLE CD 21-4z															0.00
CDBG HOUSING REHAB- SINGLE CD 21-4z															0.00
CDBG TOTAL HOURS															0.00
ARPA Admin		7.00	7.00	7.00	7.00	7.00			7.00	5.00	7.00	7.00	7.00		68.00
EastBayfront Greenway/Trail Project															
Home Services															
LHRD Grant															0.00
Other COUNTY CDBG															0.00
McKean CDBG															0.00
Union City CDBG															0.00
Albion CDBG															0.00
Girard CDBG															0.00
ACT 137															0.00
KEYSTONE - Blight															0.00
ECLB															0.00
Land Bank										2.00					2.00
OWB Keystone, Renaissance, PNC															0.00
HACE (Housing Authority)															0.00
GENERAL FUND OTHER															0.00
SUBTOTAL WORKED HOURS		7.00	7.00	7.00	7.00	7.00			7.00	7.00	7.00	7.00	7.00		70.00
HOLIDAY															0.00
VACATION															0.00
PERSONAL															0.00
FUNERAL-BEREAVEMENT															0.00
SICK/DOCTOR															0.00
COMPTIME/JURY DUTY															0.00
TOTAL		7.00	7.00	7.00	7.00	7.00			7.00	7.00	7.00	7.00	7.00		70.00

35.00

35.00

70.00

APPROVED:   
Finance Director

ELB

RACE BIWEEKLY TIME REPORT  
REVISED 8/14/09  
GRANT PROGRAM

EMPLOYEE NAME:

Decker, April

EMPLOYEE SIGNATURE



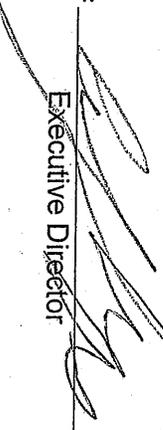
	3/12/23 SUN	3/13/23 MON	3/14/23 TUE	3/15/23 WED	3/16/23 THU	3/17/23 FRI	3/18/23 SAT	3/19/23 SUN	3/20/23 MON	3/21/23 TUE	3/22/23 WED	3/23/23 THU	3/24/23 FRI	3/25/23 SAT	TOTAL
CDBG HOUSING REHAB-SINGLE CD 21-44															0.00
CDBG HOUSING REHAB-SINGLE CD 21-44															0.00
CDBG TOTAL HOURS															0.00
ARPA Admin		5.00	5.00	6.00	6.00	5.00	0.00	0.00	7.00	5.00	5.00	6.00	2.00		52.00
East Bay from Greenway/Trail Project															
Home Services															0.00
LHRD Grant															0.00
Other COUNTY CDBG															0.00
McKean CDBG															0.00
Union City CDBG															0.00
Albion CDBG															0.00
Giard CDBG															0.00
ACT 137															0.00
KEYSTONE - Blight															0.00
ECLB															0.00
Land Bank		2.00	2.00	1.00	1.00	2.00				2.00	2.00	1.00	5.00		18.00
OWB Keystone, Renaissance, PNC															0.00
HACE (Housing Authority)															0.00
GENERAL FUND OTHER															0.00
SUBTOTAL WORKED HOURS		7.00	7.00	7.00	7.00	7.00			7.00	7.00	7.00	7.00	7.00		70.00
HOLIDAY															0.00
VACATION															0.00
PERSONAL															0.00
FUNERAL-BEREAVEMENT															0.00
SICK/DOCTOR															0.00
COMP TIME/JURY DUTY															0.00
TOTAL		7.00	7.00	7.00	7.00	7.00			7.00	7.00	7.00	7.00	7.00		70.00

35.00

35.00

70.00

APPROVED:



Executive Director

RACE BIWEEKLY TIME REPORT  
REVISED 8/7/09  
GRANT PROGRAM

EMPLOYEE NAME:

Huff, Jacob

EMPLOYEE SIGNATURE



	3/12/23 SUN	3/13/23 MON	3/14/23 TUE	3/15/23 WED	3/16/23 THU	3/17/23 FRI	3/18/23 SAT	3/19/23 SUN	3/20/23 MON	3/21/23 TUE	3/22/23 WED	3/23/23 THU	3/24/23 FRI	3/25/23 SAT	TOTAL
CDBG HOUSING REHAB-SINGLE 21-4*															0.00
CDBG HOUSING REHAB-SINGLE CD 21-4*															0.00
CDBG TOTAL HOURS	-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ARPA Admin		2.00	2.00	2.00	2.00	2.00			2.00	2.00	2.00	2.00	2.00		20.00
East Bayfront Greenway Trail Project															
Home Services															
LHRD Grant															0.00
Other COUNTY CDBG															0.00
McKean CDBG															0.00
Union City CDBG															0.00
Albion CDBG															0.00
Girard CDBG															0.00
ACT 137															0.00
KEYSTONE - Blight															0.00
ECLB															0.00
Land Bank		5.00	5.00	5.00	5.00	5.00			5.00	5.00	5.00	5.00	5.00		50.00
OWB Keystone, Renaissance, PNC															0.00
HACE (Housing Authority)															0.00
GENERAL FUND OTHER															0.00
SUBTOTAL WORKED HOURS		7.00	7.00	7.00	7.00	7.00			7.00	7.00	7.00	7.00	7.00		70.00
HOLIDAY															0.00
VACATION															0.00
PERSONAL															0.00
FUNERAL-BEREAVEMENT															0.00
SICK/DOCTOR															0.00
COMPTIME/JURY DUTY															0.00
TOTAL		7.00	7.00	7.00	7.00	7.00			7.00	7.00	7.00	7.00	7.00		70.00

35.00

35.00

35.00

70.00

APPROVED:



Finance Director

RACE BIWEEKLY TIME REPORT  
REVISED 8/4/09  
GRANT PROGRAM

EMPLOYEE NAME:

Johnson, Cynthia

EMPLOYEE SIGNATURE



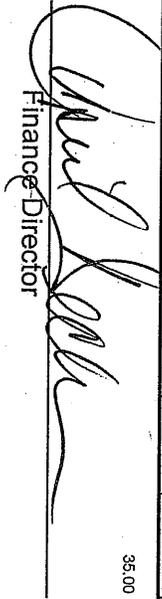
	3/12/23 SUN	3/13/23 MON	3/14/23 TUE	3/15/23 WED	3/16/23 THU	3/17/23 FRI	3/18/23 SAT	3/19/23 SUN	3/20/23 MON	3/21/23 TUE	3/22/23 WED	3/23/23 THU	3/24/23 FRI	3/25/23 SAT	TOTAL
CDBG HOUSING REHAB-SINGLE CD 21-42															0.00
CDBG HOUSING REHAB-SINGLE 21-4y															0.00
CDBG TOTAL HOURS															0.00
ARPA Admin		5.00	4.00	4.00	6.00	5.00	0.00	0.00	2.00	5.00	5.00	3.00	5.00		44.00
East Bayfront Greenway Trail Project															
Home Services															0.00
LHRD Grant															0.00
Other COUNTY CDBG															0.00
McKean CDBG			2.00	2.00											4.00
Union City CDBG															0.00
Albion CDBG															0.00
Girard CDBG															0.00
ACT 137		1.00							2.00			2.00	1.00		6.00
KEYSTONE - Blight															0.00
ECLB															0.00
Land Bank		1.00	1.00	1.00	1.00	2.00			3.00	1.00	2.00	2.00	1.00		15.00
OWB Keystone, Renaissance, PNC										1.00					1.00
HACE (Housing Authority)															0.00
GENERAL FUND OTHER															0.00
SUBTOTAL WORKED HOURS		7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00		70.00
HOLIDAY															0.00
VACATION															0.00
PERSONAL															0.00
FUNERAL-BEREAVEMENT															0.00
SICK/DOCTOR															0.00
COMPTIME/JURY DUTY															0.00
TOTAL		7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00	7.00		70.00

35.00

35.00

70.00

APPROVED:



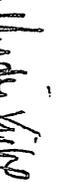
Finance Director

RACE BIWEEKLY TIME REPORT  
REVISED 8/14/09  
GRANT/ PROGRAM

EMPLOYEE NAME:

Kiehl, Melinda

EMPLOYEE SIGNATURE:



	3/12/23 SUN	3/13/23 MON	3/14/23 TUE	3/15/23 WED	3/16/23 THU	3/17/23 FRI	3/18/23 SAT	3/19/23 SUN	3/20/23 MON	3/21/23 TUE	3/22/23 WED	3/23/23 THU	3/24/23 FRI	3/25/23 SAT	TOTAL
CDBG HOUSING REHAB-SINGLE 21-4z															0.00
CDBG HOUSING REHAB-SINGLE CD 21-4z															0.00
CDBG TOTAL HOURS	-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ARPA Admin		2.00	2.00	2.00	2.00	2.00			2.00						12.00
East Bayfront Greenway Trail Project															0.00
Home Services															0.00
LHRD Grant															0.00
Other COUNTY CDBG															0.00
McKean CDBG															0.00
Union City CDBG															0.00
Albion CDBG															0.00
Ghard CDBG															0.00
ACT 137															0.00
KEYSTONE - Blight															0.00
ECLB															0.00
Land Bank		5.00	5.00	5.00	5.00	5.00			5.00						30.00
OWB Keystone, Renaissance, PNC															0.00
HACE (Housing Authority)															0.00
GENERAL FUND OTHER															0.00
SUBTOTAL WORKED HOURS		7.00	7.00	7.00	7.00	7.00			7.00	0.00	0.00	0.00	0.00		42.00
HOLIDAY															0.00
VACATION										7.00		7.00			28.00
PERSONAL															0.00
FUNERAL-BEREAVEMENT															0.00
SICK/DOCTOR															0.00
COMPTIME/JURY DUTY															0.00
TOTAL		7.00	7.00	7.00	7.00	7.00			7.00	7.00	7.00	7.00	7.00		70.00

35.00

35.00

70.00

APPROVED:   
Finance Director

RACE BIWEEKLY TIME REPORT  
REVISED 8/14/09  
GRANT PROGRAM

EMPLOYEE NAME:

Snippet, Aaron

EMPLOYEE SIGNATURE

3/12/23	3/13/23	3/14/23	3/15/23	3/16/23	3/17/23	3/18/23	3/19/23	3/20/23	3/21/23	3/22/23	3/23/23	3/24/23	3/25/23	TOTAL
SUN	MON	TUE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	SAT	

CDBG HOUSING REHAB-SINGLE 21-4y														0.00
CDBG HOUSING REHAB-SINGLE CD 21-4z														0.00
<b>CDBG TOTAL HOURS</b>														0.00
ARPA Admin		5.00	4.00	7.00	3.00	3.00	0.00		5.00	4.00				34.00
East Bayfront Greenway Trail Project	2.00				2.00			1.50	2.00					12.50
Home Services														0.00
LHRD Grant														0.00
Other COUNTY CDBG														0.00
McKean CDBG														0.00
Union City CDBG														0.00
Albion CDBG														0.00
Girard CDBG														0.00
ACT 137														0.00
KEYSTONE - Blight														0.00
ECLB														0.00
Land Bank			3.00		2.00	4.00		4.00		3.00	3.00	2.00		21.00
OWB Keystone, Renaissance, PNC														0.00
HACE (Housing Authority)														0.00
GENERAL FUND OTHER														0.00
<b>SUBTOTAL WORKED HOURS</b>	7.00	7.00	7.00	7.00	7.00	7.00		5.50	7.00	7.00	6.00	7.00		67.50
HOLIDAY														0.00
VACATION								1.50			1.00			2.50
PERSONAL														0.00
FUNERAL-BEREAVEMENT														0.00
SICK/DOCTOR														0.00
COMPTIME/JURY DUTY														0.00
<b>TOTAL</b>	7.00	7.00	7.00	7.00	7.00	7.00		7.00	7.00	7.00	7.00	7.00		70.00

35.00

35.00

70.00

APPROVED:   
Finance Director



RACE BIWEEKLY TIME REPORT  
REVISED 8/14/09  
GRANT/ PROGRAM

EMPLOYEE NAME: **Davis, Tracy**  
EMPLOYEE SIGNATURE: 

	3/26/23 SUN	3/27/23 MON	3/28/23 TUE	3/29/23 WED	3/30/23 THU	3/31/23 FRI	4/1/23 SAT	4/2/23 SUN	4/3/23 MON	4/4/23 TUE	4/5/23 WED	4/6/23 THU	4/7/23 FRI	4/8/23 SAT	TOTAL
CDBG HOUSING REHAB-SINGLE 21-4y															0.00
CDBG HOUSING REHAB-SINGLE CD 21-4z															0.00
CDBG TOTAL HOURS	-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ARPA Admin		7.00	7.00	7.00	7.00	7.00			7.00	7.00	3.00	7.00			59.00
East Bayfront Greenway Trail Project															0.00
Home Services															0.00
LHRD Grant															0.00
Other COUNTY CDBG															0.00
McKean CDBG															0.00
Union City CDBG															0.00
Albion CDBG															0.00
Girard CDBG															0.00
ACT 137															0.00
KEYSTONE - Blight															0.00
ECLB															0.00
Land Bank											4.00				4.00
OWB Keystone, Renaissance, PNC															0.00
HACE (Housing Authority)															0.00
GENERAL FUND OTHER															0.00
SUBTOTAL WORKED HOURS	7.00	7.00	7.00	7.00	7.00	7.00			7.00	7.00	7.00	7.00	0.00	7.00	63.00
HOLIDAY															7.00
VACATION															0.00
PERSONAL															0.00
FUNERAL-BEREAVEMENT															0.00
SICK/DOCTOR															0.00
COMP TIME/JURY DUTY															0.00
TOTAL	7.00	7.00	7.00	7.00	7.00	7.00			7.00	7.00	7.00	7.00	7.00	7.00	70.00

APPROVED:   
Finance Director

35.00

35.00

70.00

PPE  
April 8, 2023

RACE BIWEEKLY TIME REPORT  
REVISED 8/14/09  
GRANT/ PROGRAM

EMPLOYEE NAME: Decker, April

EMPLOYEE SIGNATURE



	3/26/23 SUN	3/27/23 MON	3/28/23 TUE	3/29/23 WED	3/30/23 THU	3/31/23 FRI	4/1/23 SAT	4/2/23 SUN	4/3/23 MON	4/4/23 TUE	4/5/23 WED	4/6/23 THU	4/7/23 FRI	4/8/23 SAT	TOTAL
CDBG HOUSING REHAB-SINGLE CD 21-4z															0.00
CDBG HOUSING REHAB-SINGLE CD 21-4z															0.00
CDBG TOTAL HOURS	-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ARPA Admin		7.00	5.00	5.00	7.00	7.00			3.00	2.00	5.00	6.00			47.00
East Bayfront Greenway Trail Project															0.00
Home Services															0.00
LHRD Grant															0.00
Other COUNTY CDBG															0.00
McKean CDBG															0.00
Union City CDBG															0.00
Albion CDBG															0.00
Girard CDBG															0.00
ACT 137															0.00
KEYSTONE - Blight															0.00
ECLB															0.00
Land Bank			2.00	2.00					4.00		2.00	1.00			11.00
OWB Keystone, Renaissance, PNC															0.00
HACE (Housing Authority)															0.00
GENERAL FUND OTHER															0.00
SUBTOTAL WORKED HOURS		7.00	7.00	7.00	7.00	7.00			7.00	2.00	7.00	7.00	0.00		58.00
HOLIDAY													7.00		7.00
VACATION															0.00
PERSONAL										5.00					5.00
FUNERAL-BEREAVEMENT															0.00
SICK/DOCTOR															0.00
COMPTIME/JURY DUTY															0.00
TOTAL		7.00	7.00	7.00	7.00	7.00			7.00	7.00	7.00	7.00	7.00		70.00

35.00

35.00

70.00

APPROVED:   
Executive Director

RACE BIWEEKLY TIME REPORT  
REVISED 8/14/09  
GRANT/ PROGRAM

EMPLOYEE NAME:

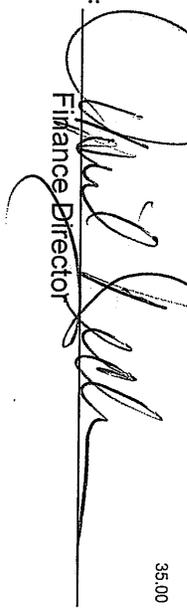
Huff, Jacob

EMPLOYEE SIGNATURE



	3/26/23	3/27/23	3/28/23	3/29/23	3/30/23	3/31/23	4/1/23	4/2/23	4/3/23	4/4/23	4/5/23	4/6/23	4/7/23	4/8/23	TOTAL
	SUN	MON	TUE	WED	THU	FRI	SAT	SUN	MON	TUE	WED	THU	FRI	SAT	
CDBG HOUSING RHBAB-SINGLE 21-4y															0.00
CDBG HOUSING RHBAB-SINGLE CD 21-4z															0.00
CDBG TOTAL HOURS	-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ARPA Admin		2.00	2.00	2.00	2.00	2.00			2.00	2.00	2.00	2.00			18.00
East Bayfront Greenway Trail Project											2.00	2.00			4.00
Home Services															0.00
LHRD Grant															0.00
Other COUNTY CDBG															0.00
Mckean CDBG															0.00
Union City CDBG															0.00
Albion CDBG															0.00
Girard CDBG															0.00
ACT 137															0.00
KEYSTONE - Blight															0.00
ECLB															0.00
Land Bank		5.00	5.00	5.00	5.00	5.00			5.00	5.00	3.00	3.00			41.00
Industrial Blight															0.00
OWB Keystone, Renaissance, PNC															0.00
HACE (Housing Authority)															0.00
GENERAL FUND OTHER															0.00
SUBTOTAL WORKED HOURS		7.00	7.00	7.00	7.00	7.00			7.00	7.00	7.00	7.00	0.00		63.00
HOLIDAY													7.00		7.00
VACATION															0.00
PERSONAL															0.00
FUNERAL-BEREAVEMENT															0.00
SICK/DOCTOR															0.00
COMPTIME/JURY DUTY															0.00
TOTAL		7.00	7.00	7.00	7.00	7.00			7.00	7.00	7.00	7.00	7.00		70.00

APPROVED:



Finance Director

35.00

35.00

70.00

PPE  
April 8, 2023

RACE BIWEEKLY TIME REPORT  
REVISED 8/14/09  
GRANT/ PROGRAM

EMPLOYEE NAME: Johnson, Cynthia  
EMPLOYEE SIGNATURE: 

	3/26/23 SUN	3/27/23 MON	3/28/23 TUE	3/29/23 WED	3/30/23 THU	3/31/23 FRI	4/1/23 SAT	4/2/23 SUN	4/3/23 MON	4/4/23 TUE	4/5/23 WED	4/6/23 THU	4/7/23 FRI	4/8/23 SAT	TOTAL
CDBG HOUSING REHAB-SINGLE 21-4z															0.00
CDBG HOUSING REHAB-SINGLE CD 21-4z															0.00
CDBG TOTAL HOURS	-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ARPA Admin		4.00	6.00	6.00	6.00	4.00			4.00	6.00	5.00	6.00			47.00
East Bayfront Greenway/Trail Project															0.00
Home Services															0.00
LHRD Grant															0.00
Other COUNTY CDBG															0.00
McKean CDBG															0.00
Union City CDBG															0.00
Albion CDBG															0.00
Girard CDBG															0.00
ACT 137		2.00				2.00					1.00				7.00
KEYSTONE - Blight															0.00
ECLB															0.00
Land Bank		1.00	1.00	1.00	1.00	1.00			1.00	1.00	1.00	1.00			9.00
OWB Keystone, Renaissance, PNC															0.00
HACE (Housing Authority)															0.00
GENERAL FUND OTHER															0.00
SUBTOTAL WORKED HOURS		7.00	7.00	7.00	7.00	7.00			7.00	7.00	7.00	7.00	0.00		63.00
HOLIDAY															7.00
VACATION															0.00
PERSONAL															0.00
FUNERAL-BEREAVEMENT															0.00
SICK/DOCTOR															0.00
COMPTIME/JURY DUTY															0.00
TOTAL		7.00	7.00	7.00	7.00	7.00			7.00	7.00	7.00	7.00	7.00		70.00

35.00

35.00

70.00

APPROVED  
  
Finance Director

RACE BIWEEKLY TIME REPORT  
REVISED 8/14/09  
GRANT PROGRAM

EMPLOYEE NAME:

Kiehl, Melinda

EMPLOYEE SIGNATURE



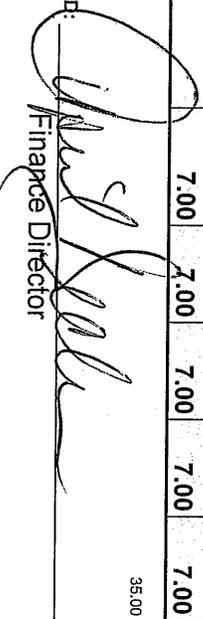
	3/26/23 SUN	3/27/23 MON	3/28/23 TUE	3/29/23 WED	3/30/23 THU	3/31/23 FRI	4/1/23 SAT	4/2/23 SUN	4/3/23 MON	4/4/23 TUE	4/5/23 WED	4/6/23 THU	4/7/23 FRI	4/8/23 SAT	TOTAL
CDBG HOUSING REHAB-SINGLE 21-4y															0.00
CDBG HOUSING REHAB-SINGLE CD 21-4z															0.00
CDBG TOTAL HOURS	-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ARPA Admin		2.00		2.00	1.00	2.00			1.00	2.00	1.00	2.00			13.00
East Bayfront Greenway Trail Project			1.50		3.00						1.00	2.00			7.50
Home Services															0.00
LHRD Grant															0.00
Other COUNTY CDBG															0.00
McKean CDBG															0.00
Union City CDBG															0.00
Albion CDBG															0.00
Girard CDBG															0.00
ACT 137															0.00
KEYSTONE - Blight															0.00
ECLB															0.00
Land Bank		4.00	5.50	5.00	3.00	5.00			5.00	5.00	5.00	3.00			40.50
Industrial Blight		1.00													1.00
OWB Keystone, Renaissance, PNC															0.00
HACE (Housing Authority)															0.00
GENERAL FUND OTHER															0.00
SUBTOTAL WORKED HOURS		7.00	7.00	7.00	7.00	7.00			6.00	7.00	7.00	7.00	0.00	7.00	62.00
HOLIDAY															7.00
VACATION															0.00
PERSONAL															0.00
FUNERAL-BEREAVEMENT															0.00
SICK/DOCTOR									1.00						1.00
COMPTIME/JURY DUTY															0.00
TOTAL		7.00	7.00	7.00	7.00	7.00			7.00	7.00	7.00	7.00	7.00	7.00	70.00

35.00

35.00

70.00

APPROVED:



Finance Director

RACE BIWEEKLY TIME REPORT  
REVISED 8/7/409  
GRANT/ PROGRAM

EMPLOYEE NAME:

Snippert, Aaron

EMPLOYEE SIGNATURE



	3/26/23 SUN	3/27/23 MON	3/28/23 TUE	3/29/23 WED	3/30/23 THU	3/31/23 FRI	4/1/23 SAT	4/2/23 SUN	4/3/23 MON	4/4/23 TUE	4/5/23 WED	4/6/23 THU	4/7/23 FRI	4/8/23 SAT	TOTAL
CDBG HOUSING REHAB-SINGLE 21-4z															0.00
CDBG HOUSING REHAB-SINGLE CD 21-4z															0.00
<b>CDBG TOTAL HOURS</b>															0.00
ARPA Admin		2.00	2.00	3.00	3.00					3.00		1.00			14.00
East Bayfront Greenway Trail Project			3.00	2.00					2.00	4.00		4.00			15.00
Home Services															0.00
LHRD Grant															0.00
Other COUNTY CDBG															0.00
Mckean CDBG															0.00
Union City CDBG															0.00
Albion CDBG															0.00
Girard CDBG															0.00
ACT 137															0.00
KEYSTONE - Blight															0.00
ECLB															0.00
Land Bank		3.00	2.00		4.00				4.00		5.00				18.00
Industrial Blight		2.00		2.00					1.00		2.00				7.00
OWB Keystone, Renaissance, PNC												2.00			2.00
HACE (Housing Authority)															0.00
GENERAL FUND OTHER															0.00
<b>SUBTOTAL WORKED HOURS</b>		7.00	7.00	7.00	7.00	0.00	0.00	0.00	7.00	7.00	7.00	7.00	0.00		56.00
HOLIDAY															7.00
VACATION															0.00
PERSONAL											7.00				7.00
FUNERAL-BEREAVEMENT															0.00
SICK/DOCTOR															0.00
COMPTIME/JURY DUTY															0.00
<b>TOTAL</b>		7.00	7.00	7.00	7.00	7.00			7.00	7.00	7.00	7.00	7.00		70.00

35.00

35.00

70.00

APPROVED:   
Finance Director

<b>FROM:</b> KAYLIN KELLER BILL SCHAAF AND ASSOCIATES, LLC 4509 CARLTON DRIVE FAIRVIEW, PA 16415  Telephone Number: 814-450.6127      Fax Number:	<h2 style="margin: 0;">INVOICE</h2> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #cccccc;">INVOICE NUMBER</th> </tr> <tr> <td style="text-align: center;">163 BRIGHTON AVE</td> </tr> <tr> <th style="background-color: #cccccc;">DATE</th> </tr> <tr> <td style="text-align: center;">03/11/2023</td> </tr> <tr> <th style="background-color: #cccccc;">REFERENCE #</th> </tr> <tr> <td>Internal Order #: 163 BRIGHTON AVE</td> </tr> <tr> <td>Lender Case #:</td> </tr> <tr> <td>Client File #:</td> </tr> <tr> <td>Main File # on form: 163 BRIGHTON AVE</td> </tr> <tr> <td>Other File # on form:</td> </tr> <tr> <td>Federal Tax ID: AVAILABLE ON REQUEST</td> </tr> <tr> <td>Employer ID:</td> </tr> </table>	INVOICE NUMBER	163 BRIGHTON AVE	DATE	03/11/2023	REFERENCE #	Internal Order #: 163 BRIGHTON AVE	Lender Case #:	Client File #:	Main File # on form: 163 BRIGHTON AVE	Other File # on form:	Federal Tax ID: AVAILABLE ON REQUEST	Employer ID:
INVOICE NUMBER													
163 BRIGHTON AVE													
DATE													
03/11/2023													
REFERENCE #													
Internal Order #: 163 BRIGHTON AVE													
Lender Case #:													
Client File #:													
Main File # on form: 163 BRIGHTON AVE													
Other File # on form:													
Federal Tax ID: AVAILABLE ON REQUEST													
Employer ID:													
<b>TO:</b> MINDY KIEHL ERIE REDEVELOPMENT AUTHORITY 626 STATE STREET ERIE, PA 16501  Telephone Number: (814) 870-1543      Fax Number: (814) 870-1331 Alternate Number:      E-Mail: mkiehl@redeveloperie.org													
DESCRIPTION													
Lender: ERIE REDEVELOPMENT AUTHORITY      Client: ERIE REDEVELOPMENT AUTHORITY Purchaser/Borrower: N/A Property Address: 163 Brighton Ave City: Erie County: ERIE      State: PA      Zip: 16509 Legal Description: RECORD BOOK 0144      PAGE 1687													
FEES	AMOUNT												
2055	325.00												
<b>SUBTOTAL</b>	325.00												
PAYMENTS	AMOUNT												
Check #:      Date:      Description: Check #:      Date:      Description: Check #:      Date:      Description:													
<b>SUBTOTAL</b>													
<b>TOTAL DUE</b>	<b>\$ 325.00</b>												

6838-11

Workplan 2023  
ELB Condemnation

<b>FROM:</b> BECKY SCHICK BILL SCHAAF AND ASSOCIATES, LLC 4509 CARLTON DRIVE FAIRVIEW, PA 16415  Telephone Number: 814-572-4509      Fax Number:	<h2 style="margin: 0;">INVOICE</h2> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">INVOICE NUMBER</th> </tr> <tr> <td style="text-align: center;">2712 EAST AVE</td> </tr> <tr> <th style="text-align: center;">DATE</th> </tr> <tr> <td style="text-align: center;">03/11/2023</td> </tr> <tr> <th style="text-align: center;">REFERENCE</th> </tr> <tr> <td>Internal Order #: 2712 EAST AVE</td> </tr> <tr> <td>Lender Case #:</td> </tr> <tr> <td>Client File #:</td> </tr> <tr> <td>Main File # on form: 2712 EAST AVE</td> </tr> <tr> <td>Other File # on form:</td> </tr> <tr> <td>Federal Tax ID: AVAILABLE ON REQUEST</td> </tr> <tr> <td>Employer ID:</td> </tr> </table>	INVOICE NUMBER	2712 EAST AVE	DATE	03/11/2023	REFERENCE	Internal Order #: 2712 EAST AVE	Lender Case #:	Client File #:	Main File # on form: 2712 EAST AVE	Other File # on form:	Federal Tax ID: AVAILABLE ON REQUEST	Employer ID:
INVOICE NUMBER													
2712 EAST AVE													
DATE													
03/11/2023													
REFERENCE													
Internal Order #: 2712 EAST AVE													
Lender Case #:													
Client File #:													
Main File # on form: 2712 EAST AVE													
Other File # on form:													
Federal Tax ID: AVAILABLE ON REQUEST													
Employer ID:													
<b>TO:</b> MINDY KIEHL ERIE REDEVELOPMENT AUTHORITY 626 STATE STREET ERIE, PA 16501  Telephone Number: (814) 870-1543      Fax Number: (814) 870-1331 Alternate Number:      E-Mail: mkiehl@redeveloperie.org													
<b>DESCRIPTION</b>													
Lender: ERIE REDEVELOPMENT AUTHORITY      Client: ERIE REDEVELOPMENT AUTHORITY Purchaser/Borrower: N/A Property Address: 2712 East Ave City: Erie County: ERIE      State: PA      Zip: 16504 Legal Description: RECORD BOOK 1478 PAGE 0560													
<b>FEES</b>													
	<b>AMOUNT</b>												
2055	325.00												
<b>SUBTOTAL</b>	325.00												
<b>PAYMENTS</b>													
	<b>AMOUNT</b>												
Check #:      Date:      Description:													
Check #:      Date:      Description:													
Check #:      Date:      Description:													
<b>SUBTOTAL</b>													
<b>TOTAL DUE</b>	\$ 325.00												

6838-11

Workplan 2023  
ELB Condemnation

<b>FROM:</b> Becky Schick BILL SCHAAF AND ASSOCIATES, LLC 4509 CARLTON DRIVE FAIRVIEW, PA 16415  Telephone Number: 814-572-4509 x      Fax Number:	<h2 style="margin: 0;">INVOICE</h2> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #cccccc;">INVOICE NUMBER</th> </tr> <tr> <td style="text-align: center;">353-55 w 3</td> </tr> <tr> <th style="background-color: #cccccc;">DATE</th> </tr> <tr> <td style="height: 20px;"> </td> </tr> <tr> <th style="background-color: #cccccc;">REFERENCE</th> </tr> <tr> <td>Internal Order #: 353-55 w 3</td> </tr> <tr> <td>Lender Case #:</td> </tr> <tr> <td>Client File #:</td> </tr> <tr> <td>Main File # on form: 353-55 w 3</td> </tr> <tr> <td>Other File # on form:</td> </tr> <tr> <td>Federal Tax ID: AVAILABLE ON REQUEST</td> </tr> <tr> <td>Employer ID:</td> </tr> </table>	INVOICE NUMBER	353-55 w 3	DATE		REFERENCE	Internal Order #: 353-55 w 3	Lender Case #:	Client File #:	Main File # on form: 353-55 w 3	Other File # on form:	Federal Tax ID: AVAILABLE ON REQUEST	Employer ID:
INVOICE NUMBER													
353-55 w 3													
DATE													
REFERENCE													
Internal Order #: 353-55 w 3													
Lender Case #:													
Client File #:													
Main File # on form: 353-55 w 3													
Other File # on form:													
Federal Tax ID: AVAILABLE ON REQUEST													
Employer ID:													
<b>TO:</b> MINDY KIEHL ERIE REDEVELOPMENT AUTHORITY 626 STATE STREET ERIE, PA 16501  Telephone Number: (814) 870-1543      Fax Number: (814) 870-1331 Alternate Number:      E-Mail: mkiehl@redeveloperie.org													
DESCRIPTION													
Lender: ERIE REDEVELOPMENT AUTHORITY      Client: Erie Redevelopment Authority Purchaser/Borrower: N/A Property Address: 353-55 W 3 City: Erie County: Erie      State: PA      Zip: 16507 Legal Description: RECORD BOOK 1299 PAGE 0536													
FEES	AMOUNT												
2055	325.00												
<b>SUBTOTAL</b>	325.00												
PAYMENTS	AMOUNT												
Check #:      Date:      Description: Check #:      Date:      Description: Check #:      Date:      Description:													
<b>SUBTOTAL</b>													
<b>TOTAL DUE</b>	<b>\$ 325.00</b>												

6838-11

Work plan 2023  
 ELB Condemnation

<p><b>FROM:</b>                  BECKY SCHICK                  BILL SCHAAF AND ASSOCIATES, LLC                  4509 CARLTON DRIVE                  FAIRVIEW, PA 16415</p> <p>Telephone Number: 814-450.6127      Fax Number:</p>	<h2 style="margin: 0;">INVOICE</h2> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <tr> <th style="text-align: center;">INVOICE NUMBER</th> </tr> <tr> <td style="text-align: center;">306-308 SASSAFRAS</td> </tr> <tr> <th style="text-align: center;">DATE</th> </tr> <tr> <td style="text-align: center;">03/11/2023</td> </tr> <tr> <th style="text-align: center;">REFERENCE</th> </tr> <tr> <td>Internal Order #: 306-308 SASSAFRAS</td> </tr> <tr> <td>Lender Case #:</td> </tr> <tr> <td>Client File #:</td> </tr> <tr> <td>Main File # on form: 306-308 SASSAFRAS</td> </tr> <tr> <td>Other File # on form:</td> </tr> <tr> <td>Federal Tax ID: AVAILABLE ON REQUEST</td> </tr> <tr> <td>Employer ID:</td> </tr> </table>	INVOICE NUMBER	306-308 SASSAFRAS	DATE	03/11/2023	REFERENCE	Internal Order #: 306-308 SASSAFRAS	Lender Case #:	Client File #:	Main File # on form: 306-308 SASSAFRAS	Other File # on form:	Federal Tax ID: AVAILABLE ON REQUEST	Employer ID:
INVOICE NUMBER													
306-308 SASSAFRAS													
DATE													
03/11/2023													
REFERENCE													
Internal Order #: 306-308 SASSAFRAS													
Lender Case #:													
Client File #:													
Main File # on form: 306-308 SASSAFRAS													
Other File # on form:													
Federal Tax ID: AVAILABLE ON REQUEST													
Employer ID:													
<p><b>TO:</b>                  MINDY KIEHL                  ERIE REDEVELOPMENT AUTHORITY                  626 STATE STREET                  ERIE, PA 16501</p> <p>Telephone Number: (814) 870-1543      Fax Number: (814) 870-1331                  Alternate Number:      E-Mail: mkiehl@redeveloperie.org</p>													
<b>DESCRIPTION</b>													
<p>Lender: ERIE REDEVELOPMENT AUTHORITY      Client: ERIE REDEVELOPMENT AUTHORITY                  Purchaser/Borrower: N/A                  Property Address: 306-308 Sassafras                  City: Erie      State: PA      Zip: 16507                  County: ERIE      Legal Description: RECORD BOOK 2016      PAGE 016614</p>													
<b>FEES</b> <span style="float: right;"><b>AMOUNT</b></span>													
2055	325.00												
<b>SUBTOTAL</b> 325.00													
<b>PAYMENTS</b> <span style="float: right;"><b>AMOUNT</b></span>													
Check #:      Date:      Description:													
Check #:      Date:      Description:													
Check #:      Date:      Description:													
<b>SUBTOTAL</b>													
<b>TOTAL DUE</b> \$      325.00													

6838-11

Workplan 2023  
ELB Condemnation

<b>FROM:</b> Becky Schick BILL SCHAAF AND ASSOCIATES, LLC 4509 CARLTON DRIVE FAIRVIEW, PA 16415  Telephone Number: 814-572-4509 x      Fax Number:	<h2 style="margin: 0;">INVOICE</h2> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #cccccc;">INVOICE NUMBER</th> </tr> <tr> <td style="text-align: center;">207 W 3</td> </tr> <tr> <th style="background-color: #cccccc;">DATE</th> </tr> <tr> <td style="height: 20px;"> </td> </tr> <tr> <th style="background-color: #cccccc;">REFERENCE</th> </tr> <tr> <td>Internal Order #: 207 W 3</td> </tr> <tr> <td>Lender Case #:</td> </tr> <tr> <td>Client File #:</td> </tr> <tr> <td>Main File # on form: 207 W 3</td> </tr> <tr> <td>Other File # on form:</td> </tr> <tr> <td>Federal Tax ID: AVAILABLE ON REQUEST</td> </tr> <tr> <td>Employer ID:</td> </tr> </table>	INVOICE NUMBER	207 W 3	DATE		REFERENCE	Internal Order #: 207 W 3	Lender Case #:	Client File #:	Main File # on form: 207 W 3	Other File # on form:	Federal Tax ID: AVAILABLE ON REQUEST	Employer ID:
INVOICE NUMBER													
207 W 3													
DATE													
REFERENCE													
Internal Order #: 207 W 3													
Lender Case #:													
Client File #:													
Main File # on form: 207 W 3													
Other File # on form:													
Federal Tax ID: AVAILABLE ON REQUEST													
Employer ID:													
<b>TO:</b> MINDY KIEHL ERIE REDEVELOPMENT AUTHORITY 626 STATE STREET ERIE, PA 16501  Telephone Number: (814) 870-1543      Fax Number: (814) 870-1331 Alternate Number:      E-Mail: mkiehl@redeveloperie.org													
DESCRIPTION													
Lender: ERIE REDEVELOPMENT AUTHORITY      Client: ERIE REDEVELOPMENT AUTHORITY Purchaser/Borrower: N/A Property Address: 207 W 3rd St City: Erie County: Erie      State: PA      Zip: 16507 Legal Description: RECORD BOOK 2016 PAGE 016614													
FEES	AMOUNT												
2055	325.00												
SUBTOTAL	325.00												
PAYMENTS	AMOUNT												
Check #:      Date:      Description: Check #:      Date:      Description: Check #:      Date:      Description:													
6838-11 SUBTOTAL													
TOTAL DUE	\$ 325.00												

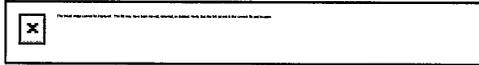
Workplan 2023  
ELB Condemnation

# April Decker

---

**From:** bounce+core+smr01qjkymr@return.recurly.com on behalf of brian@werkbot.com  
**Sent:** Tuesday, March 28, 2023 11:47 AM  
**To:** AP (Redevelopment Authority)  
**Subject:** Thank You for Your Payment

CAUTION: This email originated from outside your organization. Exercise caution when opening attachments or clicking links, especially from unknown senders.



## Thank you for your payment.

This email confirms your recent payment.

If you have any questions, please contact us at [brian@werkbot.com](mailto:brian@werkbot.com).

Thank you,  
Werkbot Studios

Invoice #2759 <a href="#">View Online</a>	Aaron Snippert 626 State Street Room 107 Erie, PA 16501 United States	Total Paid <b>\$79.00</b>
Your Plan Werkbot Hosting	Next Invoice Apr 28, 2023	Charged to Visa ... 4868 \$79.00

Description	Subtotal
Werkbot Hosting Mar 28 – Apr 28, 2023	\$79.00
	Subtotal \$79.00
	<b>Total \$79.00</b>
	Paid -\$79.00
	<b>Total Due \$0.00</b>

Werkbot Studios, LLC 1001 State St. Suite 800. Erie, PA 16501

0430-11

ELB

# Hagan Business Machines, Inc.

"The Service Leader Since 1950"

1112 Peach Street  
Erie, Pa 16501  
814-456-7521

## CONTRACT INVOICE

Invoice Number: A110037  
Invoice Date: 3/31/2023  
Account Number: ER3324  
Balance Due: \$348.52

**Bill To:** Redevelopment Authority of the City of Erie  
626 State St/Rm 107  
Erie, PA 16501-0000

**Customer:** Redevelopment Authority of the City of Erie  
626 State St/Rm 107  
Erie, PA 16501-0000

Account No	Payment Terms	Due Date	Invoice Total	Balance Due
ER3324	30 Days	4/30/2023	\$ 348.52	<b>\$ 348.52</b>
<b>Invoice Remarks</b>				

Contract Number	Contact	Contract Amount	P.O. Number	Start Date	Exp. Date
CON0427-01		\$ 348.52		6/2/2020	9/1/2025
<b>Contract Remarks</b>					

MONTHLY BILLING FOR THE ACTUAL BLACK AND COLOR PRINTS MADE

DELIVERED JUNE 2, 2020 AT BLACK CC: -0- & COLOR CC: -0-

**Summary:**

Contract base rate charge for this billing period	\$0.00 *
Contract overage charge for the 3/2/2023 to 4/1/2023 overage period	\$348.52 **
	<b>\$348.52</b>

\*Sum of equipment base charges \*\*See overage details below

**Detail:**

**Equipment included under this contract**

**Toshiba/BC4515AC**

Number	Serial Number	Base Charge	Location
18180	CNAK63998	\$0.00	Redevelopment Authority of the City of Erie 626 State St/Rm 107 Erie, PA 16501-0000

Meter Type	Meter Group	Begin Meter	End Meter	Total	Covered	Billable	Rate	Overage
B\W	BLK-18180	113,236	119,698	6,462	0	6,462	0.006500	\$42.00
Color	COL-18180	113,975	119,548	5,573	0	5,573	0.055000	\$306.52
								<b>\$348.52</b>

ELB-69.70 6430-11  
ARPA - 278.82

 **COPY**

Remit To: PO Box 1247  
Erie, PA 16512

A carrying and administration charge of 1.5% per month (18% per year) will be charged on all past due accounts.

Invoice SubTotal	\$348.52
Tax:	\$0.00
Invoice Total	\$348.52
<b>Balance Due:</b>	<b>\$348.52</b>

 **PAID**  
by RACE

Customer Care

Invoice Summary

Hours of Operation M-F, 7am - 6pm CT
Telephone 877-222-5617
Payments Toshiba Financial Services
PO Box 070241 Philadelphia, PA 19176-0241
Correspondence Customer Care
PO Box 3072 Cedar Rapids, IA 52406-3072

Contract Number 450-0007778-00
Customer Number 105259226
Invoice Number 502447456
Due Date 04/28/2023
Invoice Date 03/28/2023
Total Due \$337.0

Redevelopment Authority Of The City Of Erie
626 State St Ste 107
Erie, PA 16501

Email customerservice@financialservicing.net
Online Services https://onlinemyaccounts.com

Last payment \$168.50
posted on 02/13/2023

Important Messages

Table with columns: Contract Number, Asset Description, Model/Serial Number, Asset Location, Item Description, Amount, Tax, Item Total, Due Date, Subtotal. Includes rows for contract details and payment amounts.

Handwritten note: 6420-10-5087 ARPA \$294.88

Handwritten note: March

Handwritten note: 6430-11 ELB \$42.12

Handwritten note: Apr. 2023

Handwritten note: equip rental

Detach and return the bottom remittance portion with your payment. Include invoice number on check.

Contract Number 450-0007778-001 Due Date 04/28/2023
Invoice Number 5024474563 Invoice Date 03/28/2023
Current Due \$168.5
Total Due \$337.0

Customer Care
PO Box 3072
Cedar Rapids, IA 52406-3072

Amount Enclosed



Please make check payable to:

Toshiba Financial Services
PO Box 070241
Philadelphia, PA 19176-0241

Redevelopment Authority Of The City Of Erie
626 State St Ste 107
Erie, PA 16501



00000050244745634509000000033700202304280000000168502



# Invoice

Intuit Inc.  
2800 E. Commerce Center Place  
Tucson, AZ 85706

**Invoice number:** 10001217404888  
**Total:** \$58.30  
**Date:** Mar 24, 2023  
**Payment method:** VISA ending 9529  
**Payment authorization code:** 602306

## Bill to

April Decker  
Erie Land Bank  
626 State St|Rm 107  
Erie, PA 16501-1146  
US  
Address may be standardized for tax purposes  
**Company ID:** 9130354718241056

## Payment details

Item	Qty	Unit price	Amount
QuickBooks Online Essentials	1	\$55.00	\$55.00
Sales tax - Standard:			\$3.30

**Total invoice:** \$58.30

## Tax reporting information

<b>Period for monthly fees:</b>	Mar 24, 2023 - Apr 24, 2023
<b>Total without tax:</b>	\$55.00
<b>Total tax:</b>	\$3.30

(1) For subscriptions, your payment method on file will be automatically charged monthly/annually at the then-current list price until you cancel. If you have a discount it will apply to the then-current list price until it expires. To cancel your subscription at any time, go to Account & Settings and cancel the subscription. (2) For one-time services, your payment method on file will reflect the charge in the amount referenced in this invoice. Terms, conditions, pricing, features, service, and support options are subject to change without notice.

All dates and times are Pacific Standard Time (PST).

*6430-11*  
*Software*

# You're all set, Erie Redevelopment!

**Confirmation number: 88122524**

We sent the details to [mkiehl@redeveloperie.org](mailto:mkiehl@redeveloperie.org).

## Hotel Information



### Hampton Inn & Suites Pittsburgh New Stanton

120 North Rachel Drive New Stanton, Pennsylvania 15672 USA  
+1 724-755-4260

## Stay Information

**20** APR THU — **21** APR FRI

Check-in: 3:00 PM  
Check-out: 11:00 AM

Early check-in cannot be guaranteed. Contact the hotel to inquire about early check-in or late check-out.

## Guest information

**Erie Redevelopment Decker**

Hilton Honors#:

*Aaron, Mindy,  
Jake*

*ELB*

### 3 rooms for 3 adults

**Room 1** \$130.00

King W/ Fridge Microwave, Flexible Rate

**Room 2** \$130.00

King W/ Fridge Microwave, Flexible Rate

**Room 3** \$130.00

King W/ Fridge Microwave, Flexible Rate

Total room charge \$390.00

Total taxes \$42.90

**Total for stay: \$432.90**

## Payment



9529 Sep 2026

*Westmoreland Blight Summit  
lodging*

*WP 2022 \$79.04  
WP 2023 \$353.86*

## Guarantee Policy

There is a Credit Card required

If you use a debit/credit card to check in, a hold may be placed on your card account for the full anticipated amount to be owed to the hotel, including estimated incidentals, through your date of check-out and such hold