



P-CARD SUMMARY FORM

ATTACH STATEMENT AND RECEIPTS TO THIS FORM

Cardholder: Paul Fregeau
(Please Print)

Credit Card No.:

Building: Keil Building

Statement Date: 04/05/2019

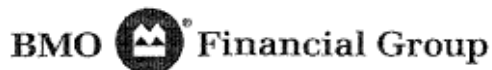
Transaction Date	Vendor	Purchase Description	Purpose of Purchase	Amount	Account Number	Receipt Enclosed (X)
03/14/19	Bob Evans	Breakfast	Meeting with President of RCC	\$ 33.40	10.00.2320.0000.0.410	X
03/15/19	Magnolia Hotel	Hotel Stay	Conference in Omaha NE	\$ 1,081.71	10.00.2320.0000.0.332	X
03/19/19	Beach House	Dinner	Meeting w/Assist Supt Candidate	\$ 149.00	10.00.2320.0000.0.410	X
03/20/19	The Gin Mill	Dinner	Meeting w/Assist Supt Candidate	\$ 110.00	10.00.2320.0000.0.410	X
			TOTAL CHARGES (Must Match Statement)	\$ 1,374.11		

Cardholder Signature: Paul Fregeau

Date: 4-8-19

Budget Manager Approval: [Signature]

Date: 4-8-19



Statement

Account Name: FREGEAU, PAUL **Card Number:** XXXX-XXXX-XXXX
Company Name: DECATUR PUBLIC SCH DIST 61 **Account Limit:** \$ 10,000.00
Employee ID: DPS_1
Statement Date (MM/DD/YYYY): 04/05/2019 **Currency:** U.S. DOLLAR
Payment Due Date (MM/DD/YYYY): 04/26/2019

Statement Summary:

Report any items which do not agree with your records within 30 days of the statement date.

Previous Balance: \$ 8.80
Payments: \$ -8.80
Adjustments: \$ 0.00
Net Purchases: \$ 1,374.11
Cash Advance: \$ 0.00
Fees: \$ 0.00
Other Charges: \$ 0.00
New Account Balance: \$ 1,374.11

Interest Charges and rates:

Item
Interest charges on this statement (\$)
Annual interest rate next period (%)
Daily interest rate next period (%)

	Purchase/Other	Cash Advances
	\$ 0.00	\$ 0.00
	12.50000 %	0.00000 %
	0.03424 %	0.00000 %

Transaction Summary:

Trans Date	Posting Date Trans ID	Description	Pre-Tax Amount Auth #	Total Tax	Trans Amount
03/14	03/15 278968825	BOB EVANS REST #0110 DECATUR IL	\$ 31.00 093220	\$ 2.40 (e)	\$ 33.40
03/15	03/15 278968824	MAGNOLIA HOTEL OMAHA OMAHA NE	\$ 1,081.71 191402	\$ 0.00	\$ 1,081.71
03/19	03/21 279965710	BEACH HOUSE - IL DECATUR IL	\$ 136.38 191126	\$ 12.62 (e)	\$ 149.00
03/20	03/22 280293796	THE GIN MILL IL DECATUR IL	\$ 100.69 185955	\$ 9.31 (e)	\$ 110.00
03/26	03/26 280833119	AUTO PAYMENT RECEIVED-THANK YOU	\$ -8.80	\$ 0.00	\$ -8.80

TOTAL CREDITS XXXX-XXXX-XXXX **\$ -8.80**
TOTAL DEBITS XXXX-XXXX-XXXX **\$ 1,374.11**

Breakfast Mtg

Bob Evans Restaurant #110
3020 N Water St
Decatur, IL 62526
(217) 875-4577

Server: Taylor
Table 38/1
Guests: 2

*Breakfast
w/ PC @
Present*

03/14/2019 7:40 AM
#30003

Check out the Survey Below
Please give us your feedback!

Diet Pepsi	2.49
Rise and Shine	7.99
Side 3 Bacon	3.49
Iced Tea	2.49
Farmer's Choice Breakfast	8.99

Complete Subtotal 25.45

071 003 300 040 100 130 20 |

Enjoy \$2 off your next purchase of \$10 or more. Visit BobEvansListens.smg.com in the next 3 days & tell us about your experience. Bring back this receipt with validation code to redeem offer in the next 30 d. Validation code: _____

Subtotal	25.45
Tax	2.86
Total	28.31

Balance Due 28.31

Crepes are back for a limited time.
Order your Easter Feast now!

Order online BobEvans.com



Breakfast Mtg

Bob Evans Restaurant #110
3020 N Water St
Decatur, IL 62526
(217) 875-4577

Server: Gary
08:32 AM
Table 38/1

DOB: 03/14/2019
03/14/2019
3/30003

SALE

03/14/2019 08:32:18
MID:000155052266 TID: 001
052140

CREDIT CARD

PURCHASE

CARD #:	XXXXXXXXXX
Chip Card:	Mastercard
Chip Card AID:	A0000000041010
ATC:	0003
TC:	19EAD50F12F36EA6
TSI: E800	ARC: 093220
INVOICE:	490500004
Approval Code:	093220
Entry Method:	Chip Read
Mode:	Issuer

Purchase:	\$28.31
Tip:	\$5.09

SALE AMOUNT \$33.40

APPROVED BY ISSUER

CUSTOMER COPY



MAGNOLIA

PURE HOSPITALITY

1615 Howard St.
Omaha, NE 68102

www.magnoliahotels.com

Paul Fregeau
Other Guests: April Fregeau
101 W. Cerro Gordo Street
Decatur 62523
UNITED STATES

Receipt

Invoice date 4/8/2019
Our reference OMA-F1118083 /
Your reference 15916SB116910

Guest **Paul Fregeau** Arrival **4/24/2019** Departure **4/27/2019** Room

Date	Description	Ref.	Quantity	Unit Price	Total (USD)
3/15/2019	MC **** Auth: 191402		1	-1081.71	-1,081.71
Paul Fregeau					Total: -1,081.71

Total Invoice
Total Paid -1,081.71
Total Due

Be sure to visit all of our hotels in Denver, Dallas, Houston, Omaha, and St. Louis.
MagnoliaHotels.com

I agree that my liability for any charges incurred by me is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part of the full amount of these charges. Interest will be charged on any overdue balance.

Signature X _____

Invoice



MAGNOLIA

PURE HOSPITALITY

1615 Howard St.
Omaha, NE 68102

www.magnoliahotels.com

Paul Fregeau
Other Guests: April Fregeau
101 W. Cerro Gordo Street
Decatur 62523
UNITED STATES

Invoice

Invoice date 4/27/2019
Invoice number 197265
Our reference OMA-F1118083 /
Your reference 15916SB116910

Guest **Paul Fregeau** Arrival **4/24/2019** Departure **4/27/2019** Room **2003**

Date	Description	Ref.	Quantity	Unit Price	Total (USD)
4/24/2019	Room Charge		1	305.15	305.15
4/24/2019	City Occupancy Tax		1	16.78	16.78
4/24/2019	State Occupancy Tax		1	3.22	3.22
4/24/2019	County Occupancy Tax		1	12.88	12.88
4/24/2019	City Sales Tax		1	4.83	4.83
4/24/2019	State Sales Tax		1	17.71	17.71
4/25/2019	Room Charge		1	305.15	305.15
4/25/2019	City Occupancy Tax		1	16.78	16.78
4/25/2019	State Occupancy Tax		1	3.22	3.22
4/25/2019	County Occupancy Tax		1	12.88	12.88
4/25/2019	City Sales Tax		1	4.83	4.83
4/25/2019	State Sales Tax		1	17.71	17.71
4/26/2019	Room Service	1018	1	17.00	17.00
4/26/2019	Room Service	1018	1	2.32	2.32
4/26/2019	Room Service	1018	1	8.08	8.08
4/26/2019	Room Service	1018	1	-1.61	-1.61
4/26/2019	Room Service	1018	1	0.36	0.36
4/26/2019	Room Service	1018	1	5.00	5.00
4/26/2019	Room Service	1018	1	1.25	1.25
4/26/2019	Room Charge		1	305.15	305.15
4/26/2019	City Occupancy Tax		1	16.78	16.78
4/26/2019	State Occupancy Tax		1	3.22	3.22
4/26/2019	County Occupancy Tax		1	12.88	12.88
4/26/2019	City Sales Tax		1	4.83	4.83
4/26/2019	State Sales Tax		1	17.71	17.71
3/15/2019	MC *** Auth: 191402		1	-1081.71	-1,081.71
4/27/2019	MC *** Auth: 125144		1	-32.40	-32.40

Paul Fregeau
Other Guests: April Fregeau
101 W. Cerro Gordo Street
Decatur 62523
UNITED STATES

Invoice

Invoice date 4/27/2019
Invoice number 197265
Our reference OMA-F1118083 /
Your reference 15916SB116910

Date	Description	Ref.	Quantity	Unit Price	Total (USD)
	Paul Fregeau			Total:	0.00
				Total Invoice	1,114.11
				Total Paid	-1,114.11
				Total Due	0.00

Be sure to visit all of our hotels in Denver, Dallas, Houston, Omaha, and St. Louis.
MagnoliaHotels.com

I agree that my liability for any charges incurred by me is not waived and agree to be held personally liable in the event that the indicated person, company or association fails to pay for any part of the full amount of these charges. Interest will be charged on any overdue balance.

Invoice

Signature X _____

Mtg w/ Candidate

BEACH HOUSE
decaturbeachhouse.com

Check: 151864
Table: 6
Server: Paula M
03/19/19

*Supper Meeting
Asst. Manager
Supper
Candidate
06:10pm
Spouse*

---[Seat 1]---	
1 Ice Water	\$0.00
Gumbo Cup	\$4.00
1 Steak	\$0.00
Filet 8oz	\$27.00
\$ Side Mushrooms	\$3.00
\$ SUB Asparagus	\$2.00
\$ SUB Mac Chz	\$2.00
---[Seat 2]---	
1 Ice Water	\$0.00
Gumbo-Bowl	\$6.00
1 Seafood	\$0.00
Sea Bass	\$28.00
\$ SUB Mush Risotto	\$2.00
---[Seat 3]---	
4 Ice Water	\$0.00
Gumbo-Bowl	\$6.00
1 Steak	\$0.00
Ribeye	\$26.00
\$ Side Mushrooms	\$3.00
\$ SUB Mac Chz	\$2.00

Subtotal:	\$111.00
Tax::	\$12.49
Sub w/Tax:	\$123.49
Total:	\$123.49

Thank you for your business!

BEACH HOUSE

2301 E Lake Shore Dr
Decatur, IL 62525
217-422-7202

Mtg w/ Candidate

BEACH HOUSE
decaturbeachhouse.com

Date: 03/19/19 Time: 06:11pm
Reg: 4
Emp: Paula M

Check: 151864
Table: 6
Card Type: Mastercard
Card Number: *****
Expiration Date: **/**
Auth #: 0003

Amount \$123.49

Tip: 25.51

Total: 149.00

I agree to pay the above total amount
according to card issuer agreement

Paul Frege
Signature

2301 E Lake Shore Dr
Decatur, IL 62525
217-422-7202

Customer Copy

Mtg w/ Candidate

The Gin Mill

Date: 03/20/19 Time: 05:59pm
Reg: 1 Table: B6
Emp: Loryn R
Check: 90079
Cardholder: FREGU, PAUL.
Card Type: Mastercard
Card Number: *****
Expiration Date: **/**
Auth Code: 185955

Amount \$92.34

Tip: 17.66

Total: 110.00

I agree to pay the above total amount
according to card issuer agreement

x Paul Fregu
Signature

124 East Prarie
Decatur, IL 62523
217-330-8073
www.ginmilldecatur.com

Customer Copy

Mtg w/ Candidate
The Gin Mill

Check: 90079
Table: B6
Server: Loryn R
03/20/19 05:56pm

2 Water	\$0.00
1 Diet Pepsi	\$3.00
2 Feature #1 Dinner	\$68.00
Delmonico Potatoes	\$1.00
Side Brussel Sprouts	\$0.00
2 Cup Lobster Bisque	\$12.00

Subtotal:	\$83.00
Tax:	\$9.34
St. w/Tax:	\$92.34
Total:	\$92.34

Thank you for your business!

124 East Prarie
Decatur, IL 62523
217-330-8073
www.ginmilldecatur.com