

THV001

Payroll Summary

Check Date	Name	Hours	Total Paid	Tax Withheld	Deductions	Net Pay	Check No	Employer Liability	Total Expense
Pay Frequency: Biweekly									
04/15/2021	[REDACTED]	19.50	487.50	0.00	0.00	487.50	DD	0.00	487.50
04/15/2021	[REDACTED]	4.00	300.00	0.00	0.00	300.00	DD	0.00	300.00
04/15/2021	[REDACTED]	8.50	510.00	0.00	0.00	510.00	DD	0.00	510.00
04/15/2021	[REDACTED]	6.00	90.00	0.00	0.00	90.00	DD	0.00	90.00
04/15/2021	[REDACTED]	8.50	255.00	0.00	0.00	255.00	DD	0.00	255.00
04/15/2021	[REDACTED]	11.00	165.00	0.00	0.00	165.00	DD	0.00	165.00
04/15/2021	[REDACTED]	6.00	900.00	0.00	0.00	900.00	DD	0.00	900.00
04/15/2021	[REDACTED]	12.95	129.50	0.00	0.00	129.50	DD	0.00	129.50
04/15/2021	[REDACTED]	8.50	510.00	0.00	0.00	510.00	DD	0.00	510.00
04/15/2021	[REDACTED]	3.00	30.00	0.00	0.00	30.00	DD	0.00	30.00
04/15/2021	[REDACTED]	2.00	60.00	0.00	0.00	60.00	DD	0.00	60.00
04/15/2021	[REDACTED]	136.60	10,245.00	3,702.05	614.70	5,928.25	DD	886.19	11,131.19
04/15/2021	[REDACTED]	3.17	190.20	0.00	0.00	190.20	DD	0.00	190.20
04/15/2021	[REDACTED]	5.00	150.00	0.00	0.00	150.00	DD	0.00	150.00
04/15/2021	[REDACTED]	8.50	85.00	0.00	0.00	85.00	DD	0.00	85.00
04/15/2021	[REDACTED]	8.50	85.00	0.00	0.00	85.00	DD	0.00	85.00
04/15/2021	[REDACTED]	68.39	1,709.75	0.00	0.00	1,709.75	DD	0.00	1,709.75
04/15/2021	[REDACTED]	8.50	1,275.00	0.00	0.00	1,275.00	DD	0.00	1,275.00
04/15/2021	[REDACTED]	37.00	925.00	0.00	0.00	925.00	DD	0.00	925.00
04/15/2021	[REDACTED]	8.50	127.50	0.00	0.00	127.50	DD	0.00	127.50
04/15/2021	[REDACTED]	6.00	180.00	0.00	0.00	180.00	DD	0.00	180.00
04/15/2021	[REDACTED]	19.00	475.00	0.00	0.00	475.00	DD	0.00	475.00
04/15/2021	[REDACTED]	23.93	478.60	0.00	0.00	478.60	DD	0.00	478.60
04/15/2021	[REDACTED]	8.15	244.50	0.00	0.00	244.50	DD	0.00	244.50
04/15/2021	[REDACTED]	8.50	255.00	0.00	0.00	255.00	DD	0.00	255.00
04/15/2021	[REDACTED]	24.00	1,560.00	0.00	0.00	1,560.00	DD	0.00	1,560.00
04/15/2021	[REDACTED]	3.00	30.00	0.00	0.00	30.00	DD	0.00	30.00
04/15/2021	[REDACTED]	29.50	737.50	0.00	0.00	737.50	DD	0.00	737.50
04/15/2021	[REDACTED]	6.85	205.50	0.00	0.00	205.50	DD	0.00	205.50
04/15/2021	[REDACTED]	8.50	85.00	0.00	0.00	85.00	DD	0.00	85.00
04/15/2021	[REDACTED]	24.28	607.00	0.00	0.00	607.00	DD	0.00	607.00
04/15/2021	[REDACTED]	12.52	162.76	0.00	0.00	162.76	DD	0.00	162.76
04/15/2021	[REDACTED]	8.50	255.00	0.00	0.00	255.00	DD	0.00	255.00
04/15/2021	[REDACTED]	8.50	255.00	0.00	0.00	255.00	DD	0.00	255.00
04/15/2021	[REDACTED]	3.17	31.70	0.00	0.00	31.70	DD	0.00	31.70
04/15/2021	[REDACTED]	34.01	850.25	0.00	0.00	850.25	DD	0.00	850.25
04/15/2021	[REDACTED]	8.50	127.50	0.00	0.00	127.50	DD	0.00	127.50
04/15/2021	[REDACTED]	6.50	195.00	0.00	0.00	195.00	DD	0.00	195.00
04/15/2021	[REDACTED]	11.30	339.00	0.00	0.00	339.00	DD	0.00	339.00
04/15/2021	[REDACTED]	60.50	1,512.50	0.00	0.00	1,512.50	DD	0.00	1,512.50
04/15/2021	[REDACTED]	8.50	510.00	0.00	0.00	510.00	DD	0.00	510.00
03/31/2021	[REDACTED]	0.00	4,800.00	1,423.51	288.00	3,088.49	DD	415.20	5,215.20
03/31/2021	[REDACTED]	0.00	880.00	0.00	0.00	880.00	DD	0.00	880.00
03/31/2021	[REDACTED]	697.82	\$33,006.26	\$5,125.56	\$902.70	\$26,978.00	DD	\$1,301.39	\$34,307.65
Pay Frequency Totals: Biweekly									
Total Net Pays for Biweekly Frequency: 43									
Company Totals:									
Total Net Pays for Company: 43									



Providers VAX Secure Invoice Upload

Tracking Number
385
 Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u>	<u>The Palmetto Palace</u>	<u>20-4940283</u>	<u>7000242891</u>
<small>Contract Number (required)</small>	<small>* Contractor Name</small>	<small>* Tax ID</small>	<small>* SCEIS Number</small>

<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
<small>Contact (Full Name)</small>	<small>Title</small>	<small>Phone EXT</small>	<small>Contact EMAIL</small>

<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
<small>* Address</small>	<small>* STE #</small>	<small>* City</small>	<small>* State * Zip</small>

INVOICE NUMBER	INVOICE AMOUNT
001	34,307.65

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

2021-04-30_090528-1

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
 5/1/2021 9:23:56 AM

<u>\$34,307.65</u>	<input checked="" type="radio"/> Yes
<small>Invoice Total</small>	<input type="radio"/> No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
 5/4/2021 10:46:09 AM

Budget and Finance Approval

Baker, Walter
 5/4/2021 1:26:49 PM

Approved Funding	_____
Approved Invoices to Date	_____
Available Funding	<u>\$0.00</u>

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
 5/6/2021 2:33:21 PM

Inv. 002

Payroll Summary

Check Date	Name	Hours	Total Paid	Tax Withheld	Deductions	Net Pay	Check No	Employer Liability	Total Expense
Pay Frequency: Biweekly									
04/30/2021	[REDACTED]	13.80	138.00	0.00	0.00	138.00	DD	0.00	138.00
04/30/2021	[REDACTED]	21.00	525.00	0.00	0.00	525.00	DD	0.00	525.00
04/30/2021	[REDACTED]	10.10	606.00	0.00	0.00	606.00	DD	0.00	606.00
04/30/2021	[REDACTED]	8.00	240.00	0.00	0.00	240.00	DD	0.00	240.00
04/30/2021	[REDACTED]	64.80	1,620.00	0.00	0.00	1,620.00	DD	0.00	1,620.00
04/30/2021	[REDACTED]	13.25	198.75	0.00	0.00	198.75	DD	0.00	198.75
04/30/2021	[REDACTED]	8.00	104.00	0.00	0.00	104.00	DD	0.00	104.00
04/30/2021	[REDACTED]	7.50	225.00	0.00	0.00	225.00	DD	0.00	225.00
04/30/2021	[REDACTED]	7.00	70.00	0.00	0.00	70.00	DD	0.00	70.00
04/30/2021	[REDACTED]	8.42	505.20	0.00	0.00	505.20	DD	0.00	505.20
04/30/2021	[REDACTED]	113.50	8,512.50	2,896.64	510.75	5,105.11	DD	736.34	9,248.84
04/30/2021	[REDACTED]	8.00	80.00	0.00	0.00	80.00	DD	0.00	80.00
04/30/2021	[REDACTED]	36.00	900.00	0.00	0.00	900.00	DD	0.00	900.00
04/30/2021	[REDACTED]	38.00	950.00	0.00	0.00	950.00	DD	0.00	950.00
04/30/2021	[REDACTED]	6.00	180.00	0.00	0.00	180.00	DD	0.00	180.00
04/30/2021	[REDACTED]	8.00	240.00	0.00	0.00	240.00	DD	0.00	240.00
04/30/2021	[REDACTED]	14.00	910.00	0.00	0.00	910.00	DD	0.00	910.00
04/30/2021	[REDACTED]	5.00	50.00	0.00	0.00	50.00	DD	0.00	50.00
04/30/2021	[REDACTED]	18.00	450.00	0.00	0.00	450.00	DD	0.00	450.00
04/30/2021	[REDACTED]	8.00	80.00	0.00	0.00	80.00	DD	0.00	80.00
04/30/2021	[REDACTED]	6.00	150.00	0.00	0.00	150.00	DD	0.00	150.00
04/30/2021	[REDACTED]	4.50	270.00	0.00	0.00	270.00	DD	0.00	270.00
04/30/2021	[REDACTED]	8.00	240.00	0.00	0.00	240.00	DD	0.00	240.00
04/30/2021	[REDACTED]	8.00	240.00	0.00	0.00	240.00	DD	0.00	240.00
04/30/2021	[REDACTED]	6.00	180.00	0.00	0.00	180.00	DD	0.00	180.00
04/30/2021	[REDACTED]	33.50	837.50	0.00	0.00	837.50	DD	0.00	837.50
04/30/2021	[REDACTED]	7.25	217.50	0.00	0.00	217.50	DD	0.00	217.50
04/30/2021	[REDACTED]	7.50	225.00	0.00	0.00	225.00	DD	0.00	225.00
04/30/2021	[REDACTED]	8.00	240.00	0.00	0.00	240.00	DD	0.00	240.00
04/30/2021	[REDACTED]	20.00	500.00	0.00	0.00	500.00	DD	0.00	500.00
04/30/2021	[REDACTED]	7.00	420.00	0.00	0.00	420.00	DD	0.00	420.00
04/30/2021	[REDACTED]	539.37	\$20,321.95	\$2,896.64	\$510.75	\$16,914.56		\$736.34	\$21,058.29
Pay Frequency Totals: Biweekly									
Total Net Pays for Biweekly Frequency: 32									
Company Totals:									
Total Net Pays for Company: 32									

Date Printed: 04/30/2021 20:54
25148195 - RU/77K

1 of 1
Run Number: 0052

Company: The Palmetto Palace
Check date: 4/30/2021 - Payroll 1
Pay Period: 04/12/2021 to: 04/25/2021



Providers VAX Secure Invoice Upload

Tracking Number

386

Date

5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

OTH-VAX-237	The Palmetto Palace	20-4940283	7000242891
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number
<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
Contact (Full Name)	Title	Phone EXT	Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>002</u>	<u>21,058.29</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

2021-04-30_090528-2

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
 5/1/2021 9:31:00 AM

\$21,058.29
 Invoice Total Yes No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval	Budget and Finance Approval	Approved Funding	_____
<div style="border: 1px solid black; padding: 5px; text-align: center;">Bonner, Melissa 5/4/2021 9:20:26 AM</div>	<div style="border: 1px solid black; padding: 5px; text-align: center;">Baker, Walter 5/5/2021 9:12:17 AM</div>	Approved Invoices to Date	_____
		Available Funding	<u>\$0.00</u>

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
 5/6/2021 3:52:50 PM



3510 Glenn McConnell
Pky
Charleston, SC 29414

(843) 518 - 8485 / extraspace.com

Inv. 003 April 08, 2021 12:48 PM EDT

Move In

Transaction # 72882001 / Shawn T

Rent 3025	558.00
04/08/21 - 10/07/21	
Insurance 3025	156.00
04/08/21 - 10/07/21 AT \$26.00/MO	
Administration Fee \$25	25.00

Transaction Total \$739.00

ES-670 2 3/4 Disc Padlock	16.99
----------------------------------	-------

Subtotal	16.99
----------	-------

Tax	1.53
-----	------

Transaction Total \$18.52

Payment Method

No payment Method(s)

There was no payment required based on a transaction total of \$0.00

Merchandise Returns will be accepted in original packaging within 30 days of purchase.

Give yourself one less thing to worry about by signing up for easypay at:

myaccount.extraspace.com



Providers VAX Secure Invoice Upload

Tracking Number
387

Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

OTH-VAX-237	The Palmetto Palace	20-4940283	7000242891
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number
Dr. Youlanda Gibbs	Executive Director	(843) 532-3169	thepalmettopalace@gmail.com
Contact (Full Name)	Title	Phone EXT	Contact EMAIL
6265 Dorchester Road Fire Station 5	North Charleston	SC	29418
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
003	739.00

Please Upload Invoice for Payment Review

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Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

ExtraSpace Storage_Invoice003

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
 5/1/2021 11:33:13 AM

\$739.00
 Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
 5/4/2021 9:25:29 AM

Budget and Finance Approval

Baker, Walter
 5/4/2021 1:19:01 PM

Approved Funding _____

Approved Invoices to Date _____

Available Funding **\$0.00**

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
 5/6/2021 2:06:01 PM

Inv. 004

Account number ending in:	5320-00001
Payment Date:	02.16.2021
Payment amount:	\$279.24
Payment method:	Bank Account ending in 1950

[Sign in](#) at any time to view account details and transactions.

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Providers VAX Secure Invoice Upload

Tracking Number
388
 Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u>	<u>The Palmetto Palace</u>	<u>20-4940283</u>	<u>7000242891</u>
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number
<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
Contact (Full Name)	Title	Phone EXT	Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>004</u>	<u>279.24</u>

Please Upload Invoice for Payment Review

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Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Communication (\$279.24). Invoice 004 pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
 5/1/2021 11:40:04 AM

\$279.24
 Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
 5/4/2021 9:32:51 AM

Budget and Finance Approval

Baker, Walter
 5/4/2021 12:53:44 PM

Approved Funding _____

Approved Invoices to Date _____

Available Funding \$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
 5/6/2021 11:53:48 AM

Inv.005

4/23/2021 10:09:37 AM

Order Number: 135390

Circle K 2703186

1135 Bees Ferry Rd
Johns Island, SC 29455
(843)571-0203

Register:3

Grant, Donna

Prepay Pump # 6	\$25.00
Sub. Total:	\$25.00
Tax:	\$0.00
Total:	\$25.00
Discount Total:	\$0.00
Debit:	\$25.00
Change	\$0.00

SALE

Debit

Card Num : (C) XXXXXXXXXXXXX4739

Chip Read

Terminal : 101

Approval : 100196

Trace : 00574016

USD\$ 25.00

US DEBIT

AID: A00000000042203

TVR: 8000048000

IAD:

XX

TST: 6800

ARC: 00

ARQC: 9855C5847D9B3767

Verified by PIN

By entering a verified PIN, cardholder agrees to pay issuer such total in accordance with issuer's agreement with cardholder

Thank You
Again



Providers VAX Secure Invoice Upload

Tracking Number
389
 Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u>	<u>The Palmetto Palace</u>	<u>20-4940283</u>	<u>7000242891</u>
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number
<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
Contact (Full Name)	Title	Phone EXT	Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
005	25.00

Please Upload Invoice for Payment Review

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Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Fuel (\$25.00) _042321.Invoice005 pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
 5/1/2021 11:42:50 AM

\$25.00

Invoice Total Yes No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
 5/4/2021 9:33:42 AM

Budget and Finance Approval

Baker, Walter
 5/4/2021 1:17:35 PM

Approved Funding _____

Approved Invoices to Date _____

Available Funding **\$0.00**

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
 5/6/2021 12:54:02 PM

Inv. 006

Give us feedback @ survey.walmart.com
Thank you! ID #: 7QBR5U8LX7J

Walmart *

803-259-2000 HGT:SONYA
11391 DUNBARTON BLVD
BARNWELL SC 29812

ST# 00795 OP# 005713 TEN 03 TR# 01547

6U HD BUNS 007874209728 F 10.56 Y

12 AT 1 FOR 0.88

6U HAMB BUNS 007874222375 F 10.56 Y

12 AT 1 FOR 0.88

6U HAMB BUNS 007874222375 F 0.88 Y

6U HAMB BUNS 007874222375 F 0.88 Y

** VOIDED ENTRY **

6U HAMB BUNS 007874222375 F 0.88 Y

** VOIDED ENTRY **

6U HAMB BUNS 007874222375 F 0.88 Y

PREP PROD C 007874205542 F 2.14 Y

PREP PROD C 007874205542 F 2.14 Y

PREP PROD C 007874205542 F 2.14 Y

ICEBERG 007143003187 F 1.48 R

ICEBERG 007143003187 F 1.48 R

ICEBERG 007143003187 F 1.48 R

TOMATO 4X5 000000003151KF 8.00 R

5.46 lb @ 1 lb / 1.48

OM MEAT HTDG 004470009701 F

WAS 3.48 YOU SAVED 0.98

5 AT 1 FOR 2.50

12.50 Y

6U BF PATTIE 007874206246 F 59.49 Y

3 AT 1 FOR 19.83

KETCHUP 007874214073 F 1.60 Y

KETCHUP 007874214073 F 1.60 Y

YELLOW MSTRD 007874206226 F 0.46 Y

YELLOW MSTRD 007874206226 F 0.46 Y

MULITPACK 002840036144 F 14.48 R

MULITPACK 002840036144 F 14.48 R

SUBTOTAL 145.13

TAX 2 1.000 % 1.45

TOTAL 146.58

DEBIT TEND 146.58

CHANGE DUE 0.00

EFT DEBIT PAY FROM PRIMARY

146.58 TOTAL PURCHASE

US DEBIT **** * 4739 I C

REF # 111300871942

NETWORK ID. 0076 APPR CODE 000818

US DEBIT

AID A0000000042203

TC D23DA467F8D61039

*Pin Verified

TERMINAL # MX904853

04/23/21 12:53:15

ITEMS SOLD 45

TC# 8349 2628 0887 0859 0471 3





Providers VAX Secure Invoice Upload

Tracking Number
390

Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

OTH-VAX-237 **The Palmetto Palace** **20-4940283** **7000242891**
 Contract Number (required) * Contractor Name * Tax ID * SCEIS Number

Dr. Youlanda Gibbs **Executive Director** **(843) 532-3169** **thepalmettopalace@gmail.com**
 Contact (Full Name) Title Phone EXT Contact EMAIL

6265 Dorchester Road Fire Station 5 **North Charleston** **SC** **29418**
 * Address * STE # * City * State * Zip

INVOICE NUMBER	INVOICE AMOUNT
006	146.50

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Marketing(\$146.50)_Allendale_Invoice006_042321

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign
Dr. Youlanda Gibbs
 5/1/2021 11:46:21 AM

\$146.50
 Invoice Total Yes No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval
Bonner, Melissa
 5/4/2021 9:34:13 AM

Budget and Finance Approval
Baker, Walter
 5/4/2021 1:23:31 PM

Approved Funding _____
 Approved Invoices to Date _____
 Available Funding **\$0.00**

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
 5/6/2021 2:15:37 PM

Inv.007

SPINX

Spinx 351

3109 West Montague

N Charleston SC 29419

843-518-5861

Pay at Pump Sale

Pump Number 14Diesel

11.204 Gal @ \$2.799/GAL \$31.36

Sub. Total: \$31.36

Tax: \$0.00

Total: \$31.36

Discover: \$31.36

Change \$0.00

Balance Due \$0.00

Term: XXXXXXXXXXXX0001

Appr: 03100R

Seq#: 000108

Capture

Discover

XXXXXXXXXXXX0879

Swiped

03/31/2021 15:45:41

I agree to pay the
above Total Amount
according to Card
Issuer Agreement.

3/31/2021 3:45:56 PM

Reg#100

Store # 351

Tran# 6286780

Making Life Easier

Inv. 008

SPEEDWAY 2836
3622 SAVANNAH HWY
JOHNS ISLAND, SC

Invoice # 0098934
Date 04/18/21
Time 06:39PM
Auth # 01806R
Sequence# 8434

DISCOVER Acct #
XXXXXXXXXXXX0879

Pump	Gallons	Price
21	16.504	\$2.799

Product	Amount
DIESEL2	\$46.19
Total Sale	\$46.19

THANK YOU!

Inv.009

THANKS FOR CHOOSING
DODGE'S

*

Charleston SC
3/21/2021 8:21:41 AM
Term: XXXXXXXXXXXX7001
Appr: 02171R
Seq#: 014629

PUMP No.	18
Grade:	Diesel
Gallons:	28.510 G
Price:	\$2.599/Gal
Total Fuel:	\$74.10
TOTAL SALE	\$74.10
Discover	\$74.10

Authorization

Discover
XXXXXXXXXXXX0879
Chip Read

Discover
Mode: Issuer
AID: A0000001523010
TVR: 0000008000
IAD:
XXXXXXXXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXX
ARC: 00
ARQC:
B7FDBB69D50AA4E7

03/21/2021 08:19:15

I agree to pay the
above Total Amount
according to Card
Issuer Agreement.

Join Our Team
DodgesCareers.com



Providers VAX Secure Invoice Upload

Tracking Number
393
 Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u>	<u>The Palmetto Palace</u>	<u>20-4940283</u>	<u>7000242891</u>
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number
<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
Contact (Full Name)	Title	Phone EXT	Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>009</u>	<u>74.10</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Mobile Fuel_(\$74.10)_032121.Invoice009pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
 5/1/2021 11:56:00 AM

\$74.10
 Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
 5/4/2021 9:36:34 AM

Budget and Finance Approval

Baker, Walter
 5/4/2021 1:19:58 PM

Approved Funding _____

Approved Invoices to Date _____

Available Funding \$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
 5/6/2021 2:08:56 PM

SPINX R366
10696 DORCHESTER RD
SUMMERVILLE, SC

Inv.010

Invoice# 0091410
Trans # 0900-1410
Date 03/27/2021
Time 05:40 PM

Pump	Quantity	Price
21	30.528	2.759

Product	Amount
DIESEL2	84.23

TOTAL 84.23

CREDIT CARD

DISCOVER 84.23

CARD# ICR

XXXXXXXXXXXX0879

AUTH # 02792R

RESPONSE:

APPROVED, Auth
#:02792R,
Amount:USD\$84.23,
Sequence #:70793,
MID:529822,
TID:002

TRANSACTION TYPE
SALE

THANK YOU!



Providers VAX Secure Invoice Upload

Tracking Number
394

Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u>	<u>The Palmetto Palace</u>	<u>20-4940283</u>	<u>7000242891</u>
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number
<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
Contact (Full Name)	Title	Phone EXT	Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
010	84.23

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Mobile Fuel_(\$84.23).Invoice010pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 11:58:22 AM

\$84.23

Invoice Total Yes No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 9:37:30 AM

Budget and Finance Approval

Baker, Walter
5/4/2021 1:03:29 PM

Approved Funding _____

Approved Invoices to Date _____

Available Funding **\$0.00**

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 12:08:08 PM

Inv.011 SPINX

Spinx 351
3109 West Montague
N Charleston SC 29419
843-518-5861

Pay at Pump Sale

Pump Number 14Diesel

15.439 Gal @ \$2.799/GAL \$43.21

Sub. Total:	\$43.21
Tax:	\$0.00
Total:	\$43.21

Discover:	\$43.21
Change	\$0.00
Balance Due	\$0.00

Term: XXXXXXXXXXXX0001

Appr: 01717R

Seq#: 032954

Capture

Discover
XXXXXXXXXXXX0879
Swiped

04/17/2021 13:40:57

I agree to pay the
above Total Amount
according to Card
Issuer Agreement.

4/17/2021 1:41:13 PM Store # 351
Reg#100 Tran# 6362827

Guess What?

We Have a New App!

To Download Visit:

SpinXtras.com

Making Life Easier



Tracking Number

395

Date

5/1/2021

Providers VAX Secure Invoice Upload

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

OTH-VAX-237 Contract Number (required)	The Palmetto Palace * Contractor Name	20-4940283 * Tax ID	7000242891 * SCEIS Number
Dr. Youlanda Gibbs Contact (Full Name)	Executive Director Title	(843) 532-3169 Phone	thepalmettopalace@gmail.com Contact EMAIL
6265 Dorchester Road Fire Station 5 * Address	 * STE #	North Charleston * City	SC 29418 * State * Zip

INVOICE NUMBER	INVOICE AMOUNT
011	43.21

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 12:00:31 PM

\$43.21

Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 9:38:06 AM

Budget and Finance Approval

Baker, Walter
5/4/2021 1:14:05 PM

Approved Funding

Approved Invoices to Date

Available Funding

\$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 12:43:00 PM

The UPS Store #5851
 8421 Dorchester Rd Ste 109
 North Charleston, SC 29420-7386
 843-552-8524

Inv. 012

Terminal....: POS5851A Date.: 4/14/2021
 Employee....: 130380 Time.: 08:53 AM

ITEM NAME	QTY	PRICE	TOTAL
20x12x12 Box	1 @	\$9.54	\$9.54
Tax			\$0.67
Enail			\$2.00
Tax	1 @	\$2.00	\$0.00
Copies			\$0.48
Tax	3 @	\$0.16	\$0.03
Subtotal			\$12.02
Shipping/Other Charges			\$0.00
Total tax			\$0.70
Total			\$12.72
Cards			\$12.72

=====
 Items Designated NR are NOT eligible
 for Returns, Refunds or Exchanges.

US Postal Rates Subject to Surcharge.



View The UPS Store, Inc.'s privacy notice at
<https://www.theupsstore.com/privacy-policy>

Discover *****0879 01463R

04/14/2021 08:53 AM
 TID 758463120001

Purchase

Discover XXXXXXXXXXXXX0879
 ENTRY METHOD CHIP
 CUM SIGN
 Invoice 0010001550
 Clerk 13038
 Response APPROVED
 Auth Code 01463R

EMV DETAILS

MODE CHIP
 AID A0000001523010
 TVR 0000008000
 IAD 0105A0800380000000000000000000
 TSI E800
 ARC Z3
 Amount USD \$12.72

GIBBS/YOULANDA

*** CUSTOMER COPY ***



Providers VAX Secure Invoice Upload

Tracking Number
396

Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u> Contract Number (required)	<u>The Palmetto Palace</u> * Contractor Name	<u>20-4940283</u> * Tax ID	<u>7000242891</u> * SCEIS Number
<u>Dr. Youlanda Gibbs</u> Contact (Full Name)	<u>Executive Director</u> Title	<u>(843) 532-3169</u> Phone	<u>thepalmettopalace@gmail.com</u> Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u> * Address	<u></u> * STE #	<u>North Charleston</u> * City	<u>SC 29418</u> * State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>012</u>	<u>12.72</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Printing (\$12.72).Invoice012pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
 5/1/2021 12:04:50 PM

\$12.72
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
 5/4/2021 9:38:40 AM

Budget and Finance Approval

Baker, Walter
 5/5/2021 9:10:09 AM

Approved Funding _____

Approved Invoices to Date _____

Available Funding \$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
 5/6/2021 3:43:44 PM



Inv. 013

FedEx Office is your destination
for printing and shipping.

873 Orleans Rd
Charleston, SC 29407-4843
Tel: (843) 571-4746

4/17/2021 2:24:51 PM EST

Team Member: Evelyn R.
Customer: Yolanda Gibbs
Account: MARY KAY INC

SALE

print	Qty 6	32.79
BW 1S on 24# Wht	192 @	0.1700 T
000330 Reg. Price	0.20	
Machine Stapling	6 @	0.0250 T
000078 Reg. Price	0.03	
Price per piece	5.46	
Regular Total	38.58	
Discounts	5.79	

Sub-Total	32.79
Tax	2.95
Deposit	0.00
Total	35.74

***** PURCHASE *****
APPROVED

Total: \$35.74

Card Type: UNKNOWN

Card Entry: CHIP

Acct #: *****4739

Approval Code: 112859

***** EMV PURCHASE *****

App Label: DEBIT MASTERCARD

Mode: Issuer

AID: A0000000041010

TVR: 8000008000

IAD: 0114A00003220000000000000000000000000000000F

TSI: 6800

ARC:

AC: D35D92BBAFD38EC6

CVM: 1E0300

Total Tender 35.74
Change Due 0.00

Total Discounts 5.79



Providers VAX Secure Invoice Upload

Tracking Number

Date

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u> Contract Number (required)	<u>The Palmetto Palace</u> * Contractor Name	<u>20-4940283</u> * Tax ID	<u>7000242891</u> * SCEIS Number
<u>Dr. Youlanda Gibbs</u> Contact (Full Name)	<u>Executive Director</u> Title	<u>(843) 532-3169</u> Phone	<u>thepalmettopalace@gmail.com</u> Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u> * Address	<u></u> * STE #	<u>North Charleston</u> * City	<u>SC 29418</u> * State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>013</u>	<u>35.74</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 12:08:18 PM

\$35.74
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 9:40:17 AM

Budget and Finance Approval

Baker, Walter
5/5/2021 9:05:44 AM

Approved Funding

Approved Invoices to Date

Available Funding

\$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 3:32:37 PM



Inv. 014

April 23, 2021 13:44

Page: 1

Receipt #: 1572899363

MasterCard #: XXXXXXXXXXXX7143

2021/04/23 13:23

Qty	Description	Amount
422	ES B&W S/S White 8.5 x11	59.08
	SubTotal	59.08
	Taxes	5.31
	Total	64.39

The Cardholder agrees to pay the Issuer of the charge card in accordance with the agreement between the Issuer and the Cardholder.

873 ORLEANS ROAD
CHARLESTON, SC 29407
(843) 571-4746
www.FedExOffice.com

Tell us how we're doing and receive
\$7 off your next \$40 print order
at fedex.com/welisten or 1-800-398-0242
Offer Code: _____ Offer expires 06/30/21

By submitting your project to FedEx Office or by making a purchase in a FedEx Office store, you agree to all FedEx Office terms and conditions, including limitations of liability. Request a copy of our terms and conditions from a team member or visit fedex.com/officeserviceterms for details.

Please Recycle This Receipt



Providers VAX Secure Invoice Upload

Tracking Number

398

Date

5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u>	<u>The Palmetto Palace</u>	<u>20-4940283</u>	<u>7000242891</u>
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number

<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
Contact (Full Name)	Title	Phone EXT	Contact EMAIL

<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>014</u>	<u>64.39</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Printing (\$64.39)_042321.Invoice014pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 12:14:28 PM

\$64.39
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 9:42:47 AM

Budget and Finance Approval

Baker, Walter
5/5/2021 9:13:24 AM

Approved Funding _____

Approved Invoices to Date _____

Available Funding \$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 3:56:21 PM

FedEx Office. 

Inv. 015

FedEx Office is your destination
for printing and shipping.

873 Orleans Rd
Charleston, SC 29407-4843
Tel: (843) 571-4746

4/16/2021 4:12:20 PM EST
Team Member: Lisa F.
Customer: Youlanda G. Hite.
Account #: XXXXXX7300-0000
Account: MARY KAY

SALE

UPDATED_3-20 21_PalmQty 1000	320.00
BW 2S on 24# Wht 1000 @	0.3200 T
000331 Reg. Price	0.40
Price per piece	0.32
Regular Total	400.00
Discounts	80.00

Sub-Total	320.00
Tax	28.80
Deposit	0.00
Total	348.80

***** PURCHASE *****
APPROVED

Total: \$348.80
Card Type: UNKNOWN
Card Entry: CHIP
Acct #: *****4739
Approval Code: 151123

***** EMV PURCHASE *****
App Label: DEBIT MASTERCARD

Mode: Issuer
AID: A0000000041010
TVR: 8000008000
IAD: 0114A000032200000000000000000000000000F
TSI: 6800
ARC:
AC: A02F4E3594FCB31F
CVM: 1E0300

Total Tender	348.80
Change Due	0.00

Total Discounts 80.00



* 1 5 7 2 0 0 8 9 0 2 3 *

Tell us how we're doing and receive
\$7 off your next \$40 print order
at fedex.com/welisten or 1-800-398-0242
Offer Code: _____ Offer expires 06/30/2021

Get your message out in a big way with
everything from full-color banners to
photo-quality posters, yard signs,
auto magnets and more.

Thank you for visiting

FedEx Office
Make It. Print It. Pack It. Ship It.
fedex.com/office

By submitting your project to FedEx
Office or by making a purchase in a
FedEx Office store, you agree to all
FedEx Office terms and conditions,
including limitations of liability.
Request a copy of our terms and
conditions from a Team Member or visit
fedex.com/officeserviceterms
for details.

Customer Copy



Providers VAX Secure Invoice Upload

Tracking Number

399

Date

5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u>	<u>The Palmetto Palace</u>	<u>20-4940283</u>	<u>7000242891</u>
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number

<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
Contact (Full Name)	Title	Phone EXT	Contact EMAIL

<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>015</u>	<u>348.80</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Printing (\$348.80).Invoice015pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 12:19:53 PM

\$348.80
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 9:43:51 AM

Budget and Finance Approval

Baker, Walter
5/4/2021 1:29:30 PM

Approved Funding _____

Approved Invoices to Date _____

Available Funding \$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 2:52:33 PM



Providers VAX Secure Invoice Upload

Tracking Number

400

Date

5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

OTH-VAX-237 Contract Number (required)	The Palmetto Palace * Contractor Name	20-4940283 * Tax ID	7000242891 * SCEIS Number
Dr. Youlanda Gibbs Contact (Full Name)	Executive Director Title	(843) 532-3169 Phone	thepalmettopalace@gmail.com Contact EMAIL
6265 Dorchester Road Fire Station 5 * Address	North Charleston * STE #	SC * City	29418 * State * Zip

INVOICE NUMBER <u>016</u>	INVOICE AMOUNT <u>1,079.10</u>
-------------------------------------	--

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Printing (\$1079.10).Invoice016pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 12:23:45 PM

\$1,079.10
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 9:44:55 AM

Budget and Finance Approval

Baker, Walter
5/5/2021 9:04:49 AM

Approved Funding _____

Approved Invoices to Date _____

Available Funding **\$0.00**

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 3:29:51 PM



Providers VAX Secure Invoice Upload

Tracking Number
401
 Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u> Contract Number (required)	<u>The Palmetto Palace</u> * Contractor Name	<u>20-4940283</u> * Tax ID	<u>7000242891</u> * SCEIS Number
<u>Dr. Youlanda Gibbs</u> Contact (Full Name)	<u>Executive Director</u> Title	<u>(843) 532-3169</u> Phone	<u>thepalmettopalace@gmail.com</u> Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u> * Address	<u></u> * STE #	<u>North Charleston</u> * City	<u>SC 29418</u> * State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>017</u>	<u>1,085.42</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Printing (\$1085.42)_040921.Invoice017pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 12:28:57 PM

\$1,085.42
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 9:58:16 AM

Budget and Finance Approval

Baker, Walter
5/4/2021 1:28:25 PM

Approved Funding

Approved Invoices to Date

Available Funding

\$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 2:47:36 PM



Providers VAX Secure Invoice Upload

Tracking Number
402
 Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u>	<u>The Palmetto Palace</u>	<u>20-4940283</u>	<u>7000242891</u>
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number
<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
Contact (Full Name)	Title	Phone EXT	Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>018</u>	<u>1,154.64</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Printing (\$1154.64)_031921.Invoice018pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
 5/1/2021 12:31:38 PM

\$1,154.64
 Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
 5/4/2021 9:59:23 AM

Budget and Finance Approval

Baker, Walter
 5/4/2021 12:48:36 PM

Approved Funding

Approved Invoices to Date

Available Funding

\$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
 5/6/2021 11:47:17 AM



Inv. 019
North Charleston Police Department
2500 City Hall Lane
North Charleston, SC 29406
843.740.5895
Lt. J.C. Holt
jholt@northcharleston.org

3.5.2021

TO Dr. Youlanda Gibbs, Executive Director
Tri-County Family Ministries
2105 Cosgrove Ave., North Charleston S.C. 29405
843.532.3169

All payments are to be paid directly to the officer working.

OFFICER	DATE AND TIME WORKED	HOURS X RATE	TOTAL
██████████████████	3/31/2021 @ 9am to 4:00pm	7hrs x \$30.00	\$210.00
██████████████████	3/31/2021 @ 9am to 4:00pm	7hrs x \$30.00	\$210.00
SUBTOTAL			\$420.00
SALES TAX			N/A
TOTAL			\$420.00



Providers VAX Secure Invoice Upload

Tracking Number
403

Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u>	<u>The Palmetto Palace</u>	<u>20-4940283</u>	<u>7000242891</u>
<small>Contract Number (required)</small>	<small>* Contractor Name</small>	<small>* Tax ID</small>	<small>* SCEIS Number</small>
<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
<small>Contact (Full Name)</small>	<small>Title</small>	<small>Phone</small>	<small>EXT</small> <small>Contact EMAIL</small>
<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
<small>* Address</small>	<small>* STE #</small>	<small>* City</small>	<small>* State</small> <small>* Zip</small>

INVOICE NUMBER	INVOICE AMOUNT
019	420.00

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Security-Traffic Support (\$420.00)_033121.Invoice019pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 12:34:13 PM

\$420.00
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 10:00:03 AM

Budget and Finance Approval

Baker, Walter
5/4/2021 12:45:27 PM

Approved Funding _____

Approved Invoices to Date _____

Available Funding **\$0.00**

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 11:44:04 AM

Inv. 020
**Extra Duty
Solutions**

BALANCE DUE

\$1,491.75

Contact Extra Duty
Solutions if you're not
sure how to pay this
invoice.



Extra Duty Solutions

Invoice	691283
Due date	May 12, 2021
Invoice amount	\$1,491.75

[View invoice](#)



Merchant details

Email: Info@extradutysolutions.com



 Information is protected and kept confidential



 Information is protected and kept confidential



Providers VAX Secure Invoice Upload

Tracking Number

404

Date

5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u> Contract Number (required)	<u>The Palmetto Palace</u> * Contractor Name	<u>20-4940283</u> * Tax ID	<u>7000242891</u> * SCEIS Number
<u>Dr. Youlanda Gibbs</u> Contact (Full Name)	<u>Executive Director</u> Title	<u>(843) 532-3169</u> Phone	<u>thepalmettopalace@gmail.com</u> Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u> * Address	<u></u> * STE #	<u>North Charleston</u> * City	<u>SC</u> * State
			<u>29418</u> * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>020</u>	<u>1,491.75</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Security:Traffic(ExtraDuty 1491.75)_051221.Invoice020pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 12:37:45 PM

\$1,491.75
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval
Bonner, Melissa
5/4/2021 10:00:44 AM

Budget and Finance Approval
Baker, Walter
5/5/2021 9:11:19 AM

Approved Funding _____

Approved Invoices to Date _____

Available Funding \$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 3:45:20 PM



Inv. 021

Final Details for Order #114-0034382-9769864

Order Placed: April 5, 2021

Amazon.com order number: 114-0034382-9769864

Order Total: \$65.30

Shipped on April 7, 2021

Items Ordered	Price
2 of: iMBAPrice (2-Pack) 21" Long Traffic Safety Rechargeable Flashing LED Light Control Wand Baton Flashlight with Blinking and Steady-glow Flashing modes Sold by: AmaMax (USA) Since 1993 iMBAPrice® Authorized Distributor (seller profile) Business Price Condition: New	\$19.95
Shipping Address: [Redacted] [Redacted] [Redacted] United States	Item(s) Subtotal: \$39.90 Shipping & Handling: \$20.00 ----- Total before tax: \$59.90 Sales Tax: \$5.40 -----
Shipping Speed: Standard Shipping	Total for This Shipment: \$65.30 -----

Payment information	
Payment Method: MasterCard Last digits: 7143	Item(s) Subtotal: \$39.90 Shipping & Handling: \$20.00 -----
Billing address THE PALMETTO PALACE, INC. PO BOX 278 JOHNS ISLAND, SC 29457-0278 United States	Total before tax: \$59.90 Estimated Tax: \$5.40 ----- Grand Total: \$65.30
Credit Card transactions	MasterCard ending in 7143: April 7, 2021: \$65.30

To view the status of your order, return to [Order Summary](#) .



Providers VAX Secure Invoice Upload

Tracking Number
405
 Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

OTH-VAX-237 **The Palmetto Palace** **20-4940283** **7000242891**
 Contract Number (required) * Contractor Name * Tax ID * SCEIS Number

Dr. Youlanda Gibbs **Executive Director** **(843) 532-3169** **thepalmettopalace@gmail.com**
 Contact (Full Name) Title Phone EXT Contact EMAIL

6265 Dorchester Road Fire Station 5 **North Charleston** **SC** **29418**
 * Address * STE # * City * State * Zip

INVOICE NUMBER	INVOICE AMOUNT
021	65.30

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Supplies (\$65.30)_ 040521.Invoice021pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
 5/1/2021 12:39:26 PM

\$65.30
 Invoice Total Yes No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
 5/4/2021 10:01:40 AM

Budget and Finance Approval

Baker, Walter
 5/5/2021 9:03:08 AM

Approved Funding _____

Approved Invoices to Date _____

Available Funding

\$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
 5/6/2021 3:25:30 PM



Inv. 022

Final Details for Order #114-8308105-7884234

Order Placed: April 5, 2021

Amazon.com order number: 114-8308105-7884234

Order Total: \$385.86

Shipped on April 6, 2021

Items Ordered	Price
3 of: Sani-Cloth Q55172 Super Wipes Surface Disinfectant Germicidal Cloths High Alcohol Large Size, 160 Count, Pack of 4 Tubs (Тwo Рack) Sold by: Johnson Distributors (seller profile) Condition: New	\$118.00
Shipping Address: [REDACTED] [REDACTED] [REDACTED] United States	Item(s) Subtotal: \$354.00 Shipping & Handling: \$0.00 ----- Total before tax: \$354.00 Sales Tax: \$31.86 -----
Shipping Speed: Standard Shipping	Total for This Shipment: \$385.86 -----

Payment information

Payment Method: MasterCard Last digits: 7143	Item(s) Subtotal: \$354.00 Shipping & Handling: \$0.00 -----
Billing address THE PALMETTO PALACE, INC. PO BOX 278 JOHNS ISLAND, SC 29457-0278 United States	Total before tax: \$354.00 Estimated Tax: \$31.86 ----- Grand Total: \$385.86
Credit Card transactions	MasterCard ending in 7143: April 6, 2021: \$385.86

To view the status of your order, return to [Order Summary](#) .



Providers VAX Secure Invoice Upload

Tracking Number

 Date

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u> Contract Number (required)	<u>The Palmetto Palace</u> * Contractor Name	<u>20-4940283</u> * Tax ID	<u>7000242891</u> * SCEIS Number
<u>Dr. Youlanda Gibbs</u> Contact (Full Name)	<u>Executive Director</u> Title	<u>(843) 532-3169</u> Phone	<u>thepalmettopalace@gmail.com</u> Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u> * Address	<u></u> * STE #	<u>North Charleston</u> * City	<u>SC 29418</u> * State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>022</u>	<u>385.86</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 12:40:57 PM

\$385.86
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 10:03:08 AM

Budget and Finance Approval

Baker, Walter
5/4/2021 1:12:58 PM

Approved Funding

Approved Invoices to Date

Available Funding

\$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 12:39:37 PM



Final Details for Order #114-1326809-2093854

Inv. 023

Order Placed: April 5, 2021

Amazon.com order number: 114-1326809-2093854

Order Total: \$5,280.90

Shipped on April 6, 2021

Items Ordered	Price
3 Of: Mr. Pen- Multipurpose Scissors, 8 inch, Pack of 4, Scissor, Scissors for Office, Craft Scissors, Scissors Bulk, Office Scissors, Sharp Scissors, Paper Sold by: Mr. Pen (seller profile) Condition: New	\$6.95
5 Of: PeerBasics, 10 Pack, Yellow Reflective High Visibility Safety Vest, Hi Vis Silver Strip, Men & Women, Work, Cycling, Runner, Surveyor, Volunteer, Cros Sold by: PeerBasics (seller profile) Business Price Condition: New	\$22.76
2 Of: 50 Pack Emesis Bag, Disposable Vomit Bags, Aircraft & Car Sickness Bag, Nausea Bags for Travel Motion Sickness Sold by: Pukebag INC (seller profile) Business Price Condition: New	\$18.99
4 Of: Alcohol Prep Pads, Medium 2-Ply - 400 Alcohol Wipes, individually wrapped Swabs, Saturated With 70% v/v Isopropyl Sold by: Red White Blue (seller profile) Condition: New	\$9.61
1 Of: MedPride Powder-Free Nitrile Exam Gloves, Large, Box/100 Sold by: HLmedical (seller profile) Business Price Condition: New	\$25.79

Shipping Address: [Redacted] United States	Item(s) Subtotal: \$236.86 Shipping & Handling: \$10.07 ----- Total before tax: \$246.93 Sales Tax: \$22.21 ----- Total for This Shipment: \$269.14 -----
Shipping Speed: Two-Day Shipping	

Shipped on April 6, 2021

Items Ordered	Price
3 Of: Amazon Basics Desktop Stapler, Full-Strip, 20 Sheet Capacity, Black (Pack of 3) Sold by: Amazon (seller profile) Business Price Condition: New	\$10.99

<p>3 of: <i>Officemate Giant Paper Clips, Pack of 10 Boxes of 100 Clips Each (1,000 Clips Total) (99914)</i></p> <p>Sold by: Amazon (seller profile)</p> <p>Business Price</p> <p>Condition: New</p>	\$7.88
<p>2 of: <i>BIC PENS Large Bulk Pack of 240 Ink Pens, Bic Round Stic Xtra Life Ballpoint Pens Medium point 1.0 mm, 120 Black Pens & 120 Blue Pens in Box Combo Pac</i></p> <p>Sold by: Prime Office Supplies (seller profile) Product question? (Ask Seller)</p> <p>Business Price</p> <p>Condition: New</p>	\$23.62
<p>1 of: <i>2021 Newest HP Chromebook 11.6 Inch HD Laptop, MediaTek MT8183 8-core Processor, 4GB RAM, 32GB eMMC SSD, WiFi, Bluetooth, Webcam, Ash Gray, Chrome OS</i></p> <p>Sold by: Oydisen Electronics (One Day Shipping Available) (seller profile) Product question? (Ask Seller)</p> <p>Business Price</p> <p>Condition: New</p>	\$228.77
<p>2 of: <i>HP Chromebook 14-inch HD Laptop, Intel Celeron N4000, 4 GB RAM, 32 GB eMMC, Chrome (14a-na0020nr, Ceramic White)</i></p> <p>Sold by: Amazon.com</p> <p>Condition: New</p>	\$219.00

<p>Shipping Address:</p> <p>██████████</p> <p>██████████████████</p> <p>██████████████████████████████</p> <p>United States</p>	<p>Item(s) Subtotal: \$770.62</p> <p>Shipping & Handling: \$16.17</p> <p>-----</p> <p>Total before tax: \$786.79</p> <p>Sales Tax: \$70.80</p> <p>-----</p> <p>Total for This Shipment: \$857.59</p> <p>-----</p>
<p>Shipping Speed:</p> <p>Two-Day Shipping</p>	

Shipped on April 6, 2021	
Items Ordered	Price
<p>1 of: <i>Disposable Poncho Disposable Rain Poncho, 200 Waterproof Plastic Disposable Rain Ponchos for Adults, Disposable Ponchos Bulk with Hood Drawstring One</i></p> <p>Sold by: Road to Best (seller profile)</p> <p>Business Price</p> <p>Condition: New</p>	\$159.95
<p>1 of: <i>Cordova Safety Products Pro Pack Yellow Caution Barricade Tape, 3 in. x 1000 ft. Roll (Pack of 12)</i></p> <p>Sold by: Amazon.com</p> <p>Condition: New</p>	\$66.67

<p>Shipping Address:</p> <p>██████████</p> <p>██████████████████</p> <p>██████████████████████████████</p> <p>United States</p>	<p>Item(s) Subtotal: \$226.62</p> <p>Shipping & Handling: \$20.82</p> <p>-----</p> <p>Total before tax: \$247.44</p> <p>Sales Tax: \$22.27</p> <p>-----</p> <p>Total for This Shipment: \$269.71</p> <p>-----</p>
<p>Shipping Speed:</p> <p>Two-Day Shipping</p>	

Shipped on April 7, 2021

Items Ordered	Price
1 Of: <i>Officemate Standard Staples, 5 Boxes General Purpose Staple (91925)</i> Sold by: Amazon (seller profile) Business Price Condition: New	\$8.97
1 Of: <i>Amazon Basics Office Tape - 12-Pack</i> Sold by: Amazon.com Condition: New	\$17.56
7 Of: <i>Plastic Clipboards (Set of 12) Multi Pack Clipboard (Colored Assorted) Strong 12.5 x 9 Inch Holds 100 Sheets! Acrylic Clipboards with Low Profile Cl</i> Sold by: maxfind (seller profile) Condition: New	\$40.95

Shipping Address:

[Redacted]
[Redacted]
[Redacted]
United States

Item(s) Subtotal:	\$313.18
Shipping & Handling:	\$20.74

Total before tax:	\$333.92
Sales Tax:	\$30.08

Total for This Shipment:	\$364.00

Shipping Speed:

Two-Day Shipping

Shipped on April 9, 2021

Items Ordered	Price
1 Of: <i>MedPride Nitrile Exam Gloves, Powder-Free, Small, Box/100</i> Sold by: HLmedical (seller profile) Business Price Condition: New	\$25.79
1 Of: <i>Clear Power 50 ft Heavy Duty Outdoor Extension Cord 12/3 SJTW, Water & Weather Resistant, Flame Retardant, Yellow, 3 Prong Grounded Plug, CP10145</i> Sold by: Clear Power (seller profile) Condition: New	\$38.99

Shipping Address:

[Redacted]
[Redacted]
[Redacted]
United States

Item(s) Subtotal:	\$64.78
Shipping & Handling:	\$4.68

Total before tax:	\$69.46
Sales Tax:	\$6.25

Total for This Shipment:	\$75.71

Shipping Speed:

Two-Day Shipping

Shipped on April 9, 2021

Items Ordered	Price
---------------	-------

<p>4 of: <i>DSTELIN Binder Clips Paper Clamps Assorted Sizes 100 Count (Black), X Large, Large, Medium, Small, X Small and Micro, 6 Sizes in One Pack, Meet Your D</i> Sold by: HZ JolMO Corp (seller profile) Condition: New</p>	\$9.99
<p>2 of: <i>Amazon Basics Office Desk Tape Dispenser - 3-Pack</i> Sold by: Amazon (seller profile) Business Price Condition: New</p>	\$16.92
<p>1 of: <i>25 Foot Lighted Outdoor Extension Cord - 12/3 SJTW Heavy Duty Yellow Extension Cable Extension Cable with 3 Prong Grounded Plug for Safety - Great for</i> Sold by: Ubiquitty (seller profile) Product question? (Ask Seller) Condition: New</p>	\$23.17
<p>4 of: <i>Deamed 1" x 3" Flexible Sheer Plastic Adhesive Bandages, Sterile Non-Stick Pad for Minor Wound Care (100 Count)</i> Sold by: MedicalRite (seller profile) Condition: New</p>	\$5.99
<p>1 of: <i>One Gallon Sharps Containers with Pop Up Lid (Two Pack)</i> Sold by: Oakridge Product (seller profile) Business Price Condition: New</p>	\$15.91
<p>1 of: <i>MedPride Powder-Free Nitrile Exam Gloves, X-Large, Box/100</i> Sold by: HLmedical (seller profile) Business Price Condition: New</p>	\$25.79
<p>1 of: <i>MedPride Powder-Free Nitrile Exam Gloves, Medium, Box/100</i> Sold by: HLmedical (seller profile) Business Price Condition: New</p>	\$25.79

Shipping Address:

██████████
████████████████████
████████████████████
United States

Item(s) Subtotal:	\$188.42
Shipping & Handling:	\$9.12

Total before tax:	\$197.54
Sales Tax:	\$17.76

Total for This Shipment:	\$215.30

Shipped on April 9, 2021

Items Ordered

1 of: *Bankers Box STOR/FILE Medium-Duty Storage Boxes, FastFold, Lift-Off Lid, Letter, Value Pack of 20 (0070110)*
Sold by: Amazon.com
Condition: New

Price
\$99.99

Shipping Address:

██████████
████████████████████
████████████████████

Item(s) Subtotal:	\$99.99
Shipping & Handling:	\$21.41

United States

Total before tax: \$121.40

Sales Tax: \$10.93

Shipping Speed:
Two-Day Shipping

Total for This Shipment: \$132.33

Shipped on April 9, 2021

Items Ordered

Price

6 Of: *SanitizeRx Hand Sanitizer | 75% Alcohol Hand Sanitizer Gel with Pump for Easy Dispensing - Antibacterial Hand Sanitizer (16 Ounces, 4-Pack)* \$18.55
Sold by: GreenHome_Essentials ([seller profile](#))
Business Price
Condition: New

Shipping Address:

[Redacted Address]

United States

Shipping Speed:
Two-Day Shipping

Item(s) Subtotal: \$111.30
Shipping & Handling: \$13.41

Total before tax: \$124.71
Sales Tax: \$11.22

Total for This Shipment: \$135.93

Shipped on April 10, 2021

Items Ordered

Price

7 Of: *Plastic Clipboards (Set of 12) Multi Pack Clipboard (Colored Assorted) Strong 12.5 x 9 Inch | Holds 100 Sheets! Acrylic Clipboards with Low Profile Cl* \$40.95
Sold by: maxfind ([seller profile](#))
Condition: New

Shipping Address:

[Redacted Address]

United States

Shipping Speed:
Two-Day Shipping

Item(s) Subtotal: \$286.65
Shipping & Handling: \$19.43

Total before tax: \$306.08
Sales Tax: \$27.58

Total for This Shipment: \$333.66

Shipped on April 10, 2021

Items Ordered

Price

1 of: *SIMBR 12/3 50 FT Extension Cord Outdoor with Triple Outlets, Heavy Duty Electrical Cord 12 Gauge Lighted, 15 Amps, 1875 Watts, UL Listed, SJTW, Yellow* \$46.99
Sold by: Tekvilla ([seller profile](#)) | Product question? ([Ask Seller](#))
Business Price
Condition: New

6 of: Plastic Clipboards (Set of 12) Multi Pack Clipboard (Colored Assorted) Strong 12.5 x 9 Inch | Holds 100 Sheets! Acrylic Clipboards with Low Profile Cl
Sold by: maxfind ([seller profile](#))
Condition: New

\$40.95

Shipping Address:

[REDACTED]
[REDACTED]
[REDACTED]
United States

Shipping Speed:

Two-Day Shipping

Item(s) Subtotal: \$292.69
Shipping & Handling: \$20.63

Total before tax: \$313.32
Sales Tax: \$28.23

Total for This Shipment: \$341.55

Shipped on April 10, 2021

Items Ordered

9 of: Post-it Super Sticky Notes, 3x3 inches, 24 Pads, 2x the Sticking Power, Miami Collection, Neon Colors (Orange, Pink, Blue, Green), Recyclable(654-24SS)
Sold by: Amazon ([seller profile](#))
Business Price
Condition: New

Price

\$15.80

Shipping Address:

[REDACTED]
[REDACTED]
[REDACTED]
United States

Shipping Speed:

Two-Day Shipping

Item(s) Subtotal: \$142.20
Shipping & Handling: \$8.42

Total before tax: \$150.62
Sales Tax: \$13.50

Total for This Shipment: \$164.12

Shipped on April 11, 2021

Items Ordered

7 of: Quality Park 9 x 12 Clasp Envelopes with Deeply Gummed Flaps, Great for Filing, Storing or Mailing Documents, 28 lb Brown Kraft, 100 per Box (37890)
Sold by: Amazon ([seller profile](#))
Business Price
Condition: New

Price

\$11.82

Shipping Address:

[REDACTED]
[REDACTED]
[REDACTED]
United States

Shipping Speed:

Two-Day Shipping

Item(s) Subtotal: \$82.74
Shipping & Handling: \$14.81

Total before tax: \$97.55
Sales Tax: \$8.75

Total for This Shipment: \$106.30

Shipped on April 11, 2021

Items Ordered

Price

2 Of: <i>Arteza Yellow Highlighters, Pack of 64, Wide Chisel Tip Markers, Bulk Pack of Colored Highlighter Markers, Office Supplies for Exams, School, Office,</i> Sold by: ARTEZA (seller profile) Product question? (Ask Seller) Business Price Condition: New	\$22.70
5 Of: <i>JJ CARE 2x2 Non Woven Gauze Sponges Pack of 1000 [40% Thicker] Non-sterile Gauze Pads for Medical, Dental, Facial Use - 4-Ply Esthetic Supplies, Spa E</i> Sold by: JJ CARE (seller profile) Condition: New	\$18.89
3 Of: <i>I Got My Covid 19 Vaccine Stickers - US Flag Design - 1.5 Inch Diameter - 500 Labels per roll</i> Sold by: ITACH (seller profile) Product question? (Ask Seller) Business Price Condition: New	\$9.45

Shipping Address:

[Redacted]
[Redacted]
[Redacted]
United States

Shipping Speed:

Two-Day Shipping

Item(s) Subtotal:	\$168.20
Shipping & Handling:	\$5.47

Total before tax:	\$173.67
Sales Tax:	\$15.61

Total for This Shipment:	\$189.28

Shipped on April 11, 2021

Items Ordered

Price

5 Of: <i>Alliance Rubber 26649 Advantage Rubber Bands Size #64, 1/4 lb Box Contains Approx. 80 Bands (3 1/2" x 1/4", Natural Crepe)</i> Sold by: Amazon (seller profile) Business Price Condition: New	\$1.79
2 Of: <i>Power Strip, POWERIVER Surge Protector with 12 Outlets and 5 USB Ports, 6 Ft Extension Cord(1875W/15A), Multiplug for Multiple Devices Smartphone Tabl</i> Sold by: XINHAO (seller profile) Condition: New	\$23.97

Shipping Address:

[Redacted]
[Redacted]
[Redacted]
United States

Shipping Speed:

Two-Day Shipping

Item(s) Subtotal:	\$56.89
Shipping & Handling:	\$2.87

Total before tax:	\$59.76
Sales Tax:	\$5.37

Total for This Shipment:	\$65.13

Shipped on April 11, 2021

Items Ordered**Price**

5 Of: Amazon Brand - Solimo Multipurpose Drawstring Trash Bags, 30 Gallon, 50 Count

\$8.61

Sold by: Amazon ([seller profile](#))

Business Price

Condition: New

Shipping Address:

[Redacted Address]

United States

Item(s) Subtotal: \$43.05

Shipping & Handling: \$10.89

Total before tax: \$53.94

Sales Tax: \$4.85

Total for This Shipment: \$58.79

Shipped on April 11, 2021**Items Ordered****Price**

2 Of: Quality Park 9 x 12 Clasp Envelopes with Deeply Gummed Flaps, Great for Filing, Storing or Mailing Documents, 28 lb Brown

\$11.82

Kraft, 100 per Box (37890)

Sold by: Amazon ([seller profile](#))

Business Price

Condition: New

1 Of: Amazon Brand - Solimo Multipurpose Drawstring Trash Bags, 30 Gallon, 50 Count

\$8.61

Sold by: Amazon ([seller profile](#))

Business Price

Condition: New

Shipping Address:

[Redacted Address]

United States

Item(s) Subtotal: \$32.25

Shipping & Handling: \$2.18

Total before tax: \$34.43

Sales Tax: \$3.09

Total for This Shipment: \$37.52

Shipped on April 12, 2021**Items Ordered****Price**

1 Of: Rubbermaid Commercial Products 1955960 Slim Jim Trash/Garbage Can with Venting Channels, 16 Gallon, Green (Pack of 4)

\$64.54

Sold by: Amazon.com

Condition: New

Shipping Address:

[Redacted Address]

United States

Item(s) Subtotal: \$64.54

Shipping & Handling: \$24.30

Total before tax: \$88.84

Shipping Speed: Two-Day Shipping	Sales Tax: \$8.00 -----
	Total for This Shipment: \$96.84 -----

Shipped on April 12, 2021	
Items Ordered	Price
1 of: 2000 PCS Bulk Blue Face Masks (40 Boxes, 50pcs/Box), Non Woven Thick 3-Layers Breathable Facial Masks with Adjustable Earloop, Mouth and Nose Cover Sold by: Bags2Basics (seller profile) Business Price Condition: New	\$119.98
1 of: Pacific Blue Select Multifold Premium 2-Ply Paper Towels by GP PRO (Georgia-Pacific), White, 21000, 125 Paper Towels Per Pack, 16 Packs Per Case Sold by: Amazon (seller profile) Business Price Condition: New	\$25.39
Shipping Address: [REDACTED] [REDACTED] [REDACTED] United States	Item(s) Subtotal: \$145.37 Shipping & Handling: \$18.95 ----- Total before tax: \$164.32 Sales Tax: \$14.79 -----
Shipping Speed: Two-Day Shipping	Total for This Shipment: \$179.11 -----

Shipped on April 12, 2021	
Items Ordered	Price
1 of: Bankers Box STOR/FILE Medium-Duty Storage Boxes, FastFold, Lift-Off Lid, Letter, Value Pack of 20 (0070110) Sold by: Amazon.com Condition: New	\$99.99
Shipping Address: [REDACTED] [REDACTED] [REDACTED] United States	Item(s) Subtotal: \$99.99 Shipping & Handling: \$21.41 ----- Total before tax: \$121.40 Sales Tax: \$10.93 -----
Shipping Speed: Two-Day Shipping	Total for This Shipment: \$132.33 -----

Shipped on April 12, 2021	
Items Ordered	Price
1 of: HALYARD FLUIDSHIELD Surgical N95 Respirators, ASTM Level 3 Mask, Regular Size, Orange, 46727 (Case of 210) Sold by: Amazon.com Condition: New	\$526.59

1 of: HALYARD FLUIDSHIELD Surgical N95 Respirators, ASTM Level 3 Face Mask, Small Size, Orange, 46827 (Case of 210) \$526.59
Sold by: Amazon.com
Condition: New

2 of: Kleenex - KCC21400 Professional Facial Tissue for Business (21400), Flat Tissue Boxes, 36 Boxes / Case, 100 Tissues / Box \$39.78
Sold by: Amazon ([seller profile](#))
Business Price
Condition: New

Shipping Address:

[REDACTED]
[REDACTED]
[REDACTED]
United States

Shipping Speed:
Two-Day Shipping

Item(s) Subtotal: \$1,132.74
Shipping & Handling: \$20.07

Total before tax: \$1,152.81
Sales Tax: \$103.75

Total for This Shipment: \$1,256.56

Payment information

Payment Method:
MasterCard | Last digits: 7143

Billing address
THE PALMETTO PALACE, INC.
PO BOX 278
JOHNS ISLAND, SC 29457-0278
United States

Item(s) Subtotal: \$4,559.08
Shipping & Handling: \$285.85

Total before tax: \$4,844.93
Estimated Tax: \$435.97

Grand Total: \$5,280.90

Credit Card transactions

MasterCard ending in 7143: April 12, 2021: \$751.98
MasterCard ending in 7143: April 12, 2021: \$4,528.92

To view the status of your order, return to [Order Summary](#) .



Providers VAX Secure Invoice Upload

Tracking Number
407
 Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u>	<u>The Palmetto Palace</u>	<u>20-4940283</u>	<u>7000242891</u>
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number
<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
Contact (Full Name)	Title	Phone EXT	Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>023</u>	<u>5,280.90</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Supplies (\$5,280.90)_040521.Invoice023pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
 5/1/2021 12:43:14 PM

\$5,280.90
 Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
 5/4/2021 10:04:36 AM

Budget and Finance Approval

Baker, Walter
 5/4/2021 1:05:22 PM

Approved Funding _____

Approved Invoices to Date _____

Available Funding \$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
 5/6/2021 12:12:24 PM

Inv. 024



LOVE'S HOME CENTERS, LLC
3125 GLENN MCCONNELL PKWY
CHARLESTON, SC 29414 (843) 852-9099

- SALE -

SALES#: S0655UIK 2584441 TRANS#: 17328320 04-13-21

2565520 PROJECT SOURCE 53-QT CLEA	54.90
5 @ 10.98	
2565506 PROJECT SOURCE 15-GAL CLE	59.92
4 @ 14.98	
936918 LOWES 2020 PATRIOTIC PAIL	6.96
2 @ 3.48	
276477 5-GAL EASY OFF BLUE LID-E	3.96
2 @ 1.98	
121649 DIET PEPSI 20-FL OZ PL SG	1.98

SUBTOTAL:	127.72
TAX:	11.36
INVOICE 13439 TOTAL:	139.08
DISC:	139.08

MYLOWE'S CARD NUMBER: 489001214906610

DISC: XXXXXXXXXXXXX0879 AMOUNT:139.08 AUTHCD: 01308R

CHIP REFID:065513023923 04/13/21 11:36:19

APL: Discover TUR: 0000008000

AID: A0000001523010 TSI: E800

STORE: 655 TERMINAL: 13 04/13/21 11:38:40

OF ITEMS PURCHASED: 14

EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOWE'S.
FOR DETAILS ON OUR RETURN POLICY, VISIT
LOWES.COM/RETURNS

A WRITTEN COPY OF THE RETURN POLICY IS AVAILABLE
AT OUR CUSTOMER SERVICE DESK

STORE MANAGER: CHRIS GENTRY

LOWE'S PRICE MATCH GUARANTEE

FOR MORE DETAILS, VISIT LOWES.COM/PRICEMATCH

* SHARE YOUR FEEDBACK! *

* ENTER FOR A CHANCE TO BE *

* ONE OF FIVE \$500 WINNERS DRAWN MONTHLY! *

* iENTRE EN EL SORTEO MENSUAL *

* PARA SER UNO DE LOS CINCO GANADORES DE \$500! *

* ENTER BY COMPLETING A SHORT SURVEY *

* WITHIN ONE WEEK AT: www.lowes.com/survey *

* Y O U R I D #134395 065531 035288 *

* NO PURCHASE NECESSARY TO ENTER OR WIN. *

* VOID WHERE PROHIBITED. MUST BE 18 OR OLDER TO ENTER. *

* OFFICIAL RULES & WINNERS AT: www.lowes.com/survey *

STORE: 655 TERMINAL: 13 04/13/21 11:38:40



Providers VAX Secure Invoice Upload

Tracking Number

408

Date

5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

OTH-VAX-237

Contract Number (required)

The Palmetto Palace

* Contractor Name

20-4940283

* Tax ID

7000242891

* SCEIS Number

Dr. Youlanda Gibbs

Contact (Full Name)

Executive Director

Title

(843) 532-3169

Phone

EXT

thepalmettopalace@gmail.com

Contact EMAIL

6265 Dorchester Road Fire Station 5

* Address

* STE #

North Charleston

* City

SC 29418

* State

* Zip

INVOICE NUMBER

024

INVOICE AMOUNT

139.08

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Supplies (\$139.08)_Loves041321.Invoice024pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 12:51:58 PM

\$139.08

Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 10:08:34 AM

Budget and Finance Approval

Baker, Walter
5/4/2021 1:00:33 PM

Approved Funding

Approved Invoices to Date

Available Funding

\$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 12:04:27 PM

Welcome to Best Buy #1120
1987 SAM RITTENBERG BLVD
CHARLESTON, SC 29407



Inv. 025

Val: 100000-553932-450069-326246-608988-26395

1120 064 3350 04/16/21 13:55

6450167 14-DK1013DX 299.99
HP 14-DK1013DX
Sales Tax 27.00

Subtotal 299.99
Sales Tax 27.00

=====
Total 326.99

*****4739 ChipRead USD\$ 326.99
US DEBIT - DEBIT
PALACE/THE PALMETTO
Approval 002002
Verified By PIN

CARD ENTRY: Chip
MODE: Issuer
AID: A0000000042203
Reference Number: 64413554787031

My Best Buy
Member ID 4575613245

YOULANDA,
Thanks for shopping at Best Buy today!
Your My Best Buy balance as of 11/12/2020
Posted points: 224
Go to BestBuy.com for more info

Return/Exchange Policy: 15 days on most
purchases. 14 days on devices that can be
activated and cell phones. For details,
go to BestBuy.com>Returns.

To learn about privacy practices
go to BestBuy.com/Privacy.

Your Customer Service PIN is:
1120 064 3350 041621



Providers VAX Secure Invoice Upload

Tracking Number

Date

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u> Contract Number (required)	<u>The Palmetto Palace</u> * Contractor Name	<u>20-4940283</u> * Tax ID	<u>7000242891</u> * SCEIS Number
<u>Dr. Youlanda Gibbs</u> Contact (Full Name)	<u>Executive Director</u> Title	<u>(843) 532-3169</u> Phone	<u>thepalmettopalace@gmail.com</u> Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u> * Address	<u></u> * STE #	<u>North Charleston</u> * City	<u>SC 29418</u> * State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>025</u>	<u>326.99</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 1:00:56 PM

\$326.99
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 10:47:37 AM

Budget and Finance Approval

Baker, Walter
5/5/2021 9:02:11 AM

Approved Funding

Approved Invoices to Date

Available Funding

\$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 3:21:59 PM

Welcome to Best Buy #1120
1987 SAM RITTENBERG BLVD
CHARLESTON SC 29407

Inv. 026



Val 100000 553932-450069-326246-608986 94024

1120 064 3349 04/16/21 13 54

6450167 14-DK1013DX 299 99

HP 14-DK1013DX

Sales Tax 27 00

Subtotal 299 99

Sales Tax 27 00

=====
Total 326 99

*****4739 ChipRead USD\$ 326 99

US DEBIT - DEBIT

PALACE/THE PALMETTO

Approval 001777

Verified By PIN

CARD ENTRY: Chip

MODE: Issuer

AID: A0000000042203

Reference Number: 64413544633507

My Best Buy

Member ID 4575613245

YOULANDA,

Thanks for shopping at Best Buy today!

Your My Best Buy balance as of 11/12/2020

Posted points: 224

Go to BestBuy.com for more info

Return/Exchange Policy: 15 days on most purchases. 14 days on devices that can be activated and cell phones. For details, go to BestBuy.com>Returns.

To learn about privacy practices go to BestBuy.com/Privacy.

Your Customer Service PIN is:
1120 064 3349 041621



Providers VAX Secure Invoice Upload

Tracking Number

Date

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u> Contract Number (required)	<u>The Palmetto Palace</u> * Contractor Name	<u>20-4940283</u> * Tax ID	<u>7000242891</u> * SCEIS Number
<u>Dr. Youlanda Gibbs</u> Contact (Full Name)	<u>Executive Director</u> Title	<u>(843) 532-3169</u> Phone	<u>thepalmettopalace@gmail.com</u> Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u> * Address	<u></u> * STE #	<u>North Charleston</u> * City	<u>SC 29418</u> * State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>026</u>	<u>326.99</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 1:08:12 PM

\$326.99
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 10:10:15 AM

Budget and Finance Approval

Baker, Walter
5/4/2021 1:21:10 PM

Approved Funding _____

Approved Invoices to Date _____

Available Funding \$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 2:11:52 PM

Welcome to Best Buy #1120
1987 SAM RITTENBERG BLVD
CHARLESTON, SC 29407



Inv. 027

Val 100000 553932 450069 326246 608985 61656

1120 064 3348 04/16/21 13:53

6450167	14-DK1013DX	299.99
	HP 14-DK1013DX	
	Sales Tax	27.00

	Subtotal	299.99
	Sales Tax	27.00
		=====
	Total	326.99

*****4739 ChipRead USD\$ 326.99
US DEBIT - DEBIT
PALACE/THE PALMETTO
Approval 001471
Verified By PIN

CARD ENTRY: Chip
MODE: Issuer
AID: A0000000042203
Reference Number: 64413535100023

My Best Buy
Member ID 4575613245

YOULANDA,
Thanks for shopping at Best Buy today!
Your My Best Buy balance as of 11/12/2020
Posted points: 224
Go to BestBuy.com for more info

Return/Exchange Policy: 15 days on most
purchases. 14 days on devices that can be
activated and cell phones. For details,
go to BestBuy.com>Returns.

To learn about privacy practices
go to BestBuy.com/Privacy.

Your Customer Service PIN is:
1120 064 3348 041621



Providers VAX Secure Invoice Upload

Tracking Number
411

Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

OTH-VAX-237 **The Palmetto Palace** **20-4940283** **7000242891**
 Contract Number (required) * Contractor Name * Tax ID * SCEIS Number

Dr. Youlanda Gibbs **Executive Director** **(843) 532-3169** **thepalmettopalace@gmail.com**
 Contact (Full Name) Title Phone EXT Contact EMAIL

6265 Dorchester Road Fire Station 5 **North Charleston** **SC** **29418**
 * Address * STE # * City * State * Zip

INVOICE NUMBER **INVOICE AMOUNT**
027 **326.99**

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Supplies (\$326.99)_BestBuy041621.Invoice027pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 1:14:47 PM

\$326.99
 Invoice Total Yes No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval
Bonner, Melissa
5/4/2021 10:09:25 AM

Budget and Finance Approval
Baker, Walter
5/4/2021 1:07:51 PM

Approved Funding _____
 Approved Invoices to Date _____
 Available Funding **\$0.00**

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 12:15:12 PM



Details for Order #114-7498941-5457828

Inv. 028

Order Placed: April 5, 2021

Amazon.com order number: 114-7498941-5457828

Order Total: \$475.34

Not Yet Shipped	
Items Ordered	Price
2 of: Uniden SX407-2CKFHS, Up to 40 Mile Range, Emergency Two-Way Radio Walkie Talkies, Built-in FM Radio, LED Flashlight & Strobe Light, NOAA Weather Alerts, Includes 2 Headsets & Dual Charging Cradle Sold by: SUPERSERVICEALWAYS (seller profile) Condition: New	\$218.05
Shipping Address: [REDACTED] [REDACTED] United States	Item(s) Subtotal: \$436.10 Shipping & Handling: \$0.00 ----- Total before tax: \$436.10 Sales Tax: \$39.24 -----
Shipping Speed: Economy Shipping	Total for This Shipment: \$475.34 -----

Payment information	
Payment Method: MasterCard Last digits: 7143	Item(s) Subtotal: \$436.10 Shipping & Handling: \$0.00 -----
Billing address THE PALMETTO PALACE, INC. PO BOX 278 JOHNS ISLAND, SC 29457-0278 United States	Total before tax: \$436.10 Estimated Tax: \$39.24 ----- Grand Total: \$475.34

To view the status of your order, return to [Order Summary](#) .



Providers VAX Secure Invoice Upload

Tracking Number
412

Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

OTH-VAX-237 Contract Number (required)	The Palmetto Palace * Contractor Name	20-4940283 * Tax ID	7000242891 * SCEIS Number
Dr. Youlanda Gibbs Contact (Full Name)	Executive Director Title	(843) 532-3169 Phone	thepalmettopalace@gmail.com Contact EMAIL
6265 Dorchester Road Fire Station 5 * Address	North Charleston * STE #	SC * City	29418 * State * Zip

INVOICE NUMBER	INVOICE AMOUNT
028	475.34

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Supplies (\$475.34).Invoice028pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 1:18:08 PM

\$475.34
Invoice Total Yes No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval
Bonner, Melissa
5/4/2021 10:10:52 AM

Budget and Finance Approval
Baker, Walter
5/4/2021 1:38:39 PM

Approved Funding
Approved Invoices to Date
Available Funding **\$0.00**

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 3:10:06 PM

Invoice: \$60.98

Inv.029

 MEG MCCONNELL

FROM Meg McConnell
5510 Alma Terrace
Colorado Springs, 80917

INVOICE 287
ISSUED April 9, 2021
DUE DATE April 16, 2021

TO Palmetto Palace
Youlanda Gibbs

PAID

ITEM

QUANTITY

PRICE

TOTAL

HalfPriceBanner.com Order

1

\$60.98

\$60.98

Reimbursement for 2 double-sided yard signs

Subtotal: **\$60.98**

Tax: **\$0.00**

Total: \$60.98

Payment received April 9, 2021 **\$60.98**

Balance Due: \$0.00

After 30 days, a finance charge of 1.5% per month (18% annually) will be added to all overdue balances. Payment may be made via check (payable to 'Meg McConnell'), cash, or through Stripe (Visa, Mastercard, American Express, Discover, and debit cards).



Providers VAX Secure Invoice Upload

Tracking Number

413

Date

5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

OTH-VAX-237 Contract Number (required)	The Palmetto Palace * Contractor Name	20-4940283 * Tax ID	7000242891 * SCEIS Number
Dr. Youlanda Gibbs Contact (Full Name)	Executive Director Title	(843) 532-3169 Phone	thepalmettopalace@gmail.com Contact EMAIL
6265 Dorchester Road Fire Station 5 * Address	North Charleston * STE #	SC * City	29418 * State * Zip

INVOICE NUMBER	INVOICE AMOUNT
029	60.98

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Supplies(\$60.98)_041621_MM.Invoice029pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 1:22:02 PM

\$60.98
Invoice Total Yes No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 10:11:27 AM

Budget and Finance Approval

Baker, Walter
5/4/2021 1:10:45 PM

Approved Funding

Approved Invoices to Date

Available Funding **\$0.00**

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 12:26:14 PM

Inv. 031

Give us feedback @ survey.walmart.com
Thank you! ID #: 70BRF41JGR2

Walmart

843-884-2844 Mgr: TBD
3000 PROPRIETORS PL
MI PLEASANT SC 29466

ST# 04384 OP# 009039 IE# 39 TR# 05224
LT 55 QT 008148381855 97.00 X

SUBTOTAL 97.00

TAX 1 9.000 % 8.73

TOTAL 105.73

DEBIT TEND 105.73

CHANGE DUE 0.00

EFT DEBIT PAY FROM PRIMARY

105.73 TOTAL PURCHASE

ACCOUNT # **** * 0724 S

REF # 110900514649

NETWORK ID. 0076 APPR CODE 454018

TERMINAL # 50010603

04/19/21 11:25:44

ITEMS SOLD 1

IC# 9637 5775 7948 6981 0364 8





Providers VAX Secure Invoice Upload

Tracking Number
415

Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

OTH-VAX-237 Contract Number (required)	The Palmetto Palace * Contractor Name	20-4940283 * Tax ID	7000242891 * SCEIS Number
Dr. Youlanda Gibbs Contact (Full Name)	Executive Director Title	(843) 532-3169 Phone	thepalmettopalace@gmail.com Contact EMAIL
6265 Dorchester Road Fire Station 5 * Address	North Charleston * STE #	SC * City	29418 * State * Zip

INVOICE NUMBER	INVOICE AMOUNT
031	105.73

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Supplies(\$105.73)_Cooler_041921.Invoice031pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 1:28:33 PM

\$105.73
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 10:17:31 AM

Budget and Finance Approval

Baker, Walter
5/4/2021 1:36:30 PM

Approved Funding _____

Approved Invoices to Date _____

Available Funding **\$0.00**

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 3:01:05 PM



Final Details for Order #114-4617385-3033067

Iny.032

Order Placed: April 5, 2021

Amazon.com order number: 114-4617385-3033067

Order Total: \$238.55

Shipped on April 6, 2021

Items Ordered	Price
1 Of: Reliancer 12PCS 28" Traffic Cones PVC Safety Road Parking Cones with Black Weighted Base w/6" & 4" Reflective Collars Fluorescent Orange Hazard Cones Co Sold by: Reliancer (seller profile) Product question? (Ask Seller) Business Price Condition: New	\$218.85
Shipping Address: [REDACTED] United States	Item(s) Subtotal: \$218.85 Shipping & Handling: \$0.00 ----- Total before tax: \$218.85 Sales Tax: \$19.70 -----
Shipping Speed: Standard Shipping	Total for This Shipment: \$238.55 -----

Payment information	
Payment Method: MasterCard Last digits: 7143	Item(s) Subtotal: \$218.85 Shipping & Handling: \$0.00 -----
Billing address THE PALMETTO PALACE, INC. PO BOX 278 JOHNS ISLAND, SC 29457-0278 United States	Total before tax: \$218.85 Estimated Tax: \$19.70 ----- Grand Total: \$238.55
Credit Card transactions	MasterCard ending in 7143: April 6, 2021: \$238.55

To view the status of your order, return to [Order Summary](#) .



Providers VAX Secure Invoice Upload

Tracking Number

416

Date

5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u>	<u>The Palmetto Palace</u>	<u>20-4940283</u>	<u>7000242891</u>
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number
<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
Contact (Full Name)	Title	Phone EXT	Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>032</u>	<u>238.55</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Supplies(\$238.55) _040521_ Invoice032

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 1:31:49 PM

\$238.55
Invoice Total Yes No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 10:18:28 AM

Budget and Finance Approval

Baker, Walter
5/5/2021 8:59:09 AM

Approved Funding

Approved Invoices to Date

Available Funding

\$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 3:13:25 PM



Details for Order #114-7498941-5457828

Inv. 033

Order Placed: April 5, 2021

Amazon.com order number: 114-7498941-5457828

Order Total: \$475.34

Not Yet Shipped	
Items Ordered	Price
2 of: Uniden SX407-2CKFHS, Up to 40 Mile Range, Emergency Two-Way Radio Walkie Talkies, Built-in FM Radio, LED Flashlight & Strobe Light, NOAA Weather Alerts, Includes 2 Headsets & Dual Charging Cradle Sold by: SUPERSERVICEALWAYS (seller profile) Condition: New	\$218.05
Shipping Address: [REDACTED] [REDACTED] United States	Item(s) Subtotal: \$436.10 Shipping & Handling: \$0.00 ----- Total before tax: \$436.10 Sales Tax: \$39.24 -----
Shipping Speed: Economy Shipping	Total for This Shipment: \$475.34 -----

Payment information	
Payment Method: MasterCard Last digits: 7143	Item(s) Subtotal: \$436.10 Shipping & Handling: \$0.00 -----
Billing address THE PALMETTO PALACE, INC. PO BOX 278 JOHNS ISLAND, SC 29457-0278 United States	Total before tax: \$436.10 Estimated Tax: \$39.24 ----- Grand Total: \$475.34

To view the status of your order, return to [Order Summary](#) .



Providers VAX Secure Invoice Upload

Tracking Number

417

Date

5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u>	<u>The Palmetto Palace</u>	<u>20-4940283</u>	<u>7000242891</u>
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number
<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
Contact (Full Name)	Title	Phone EXT	Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>033</u>	<u>436.10</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Supplies \$436.10_Invoice033

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 1:33:52 PM

\$436.10
Invoice Total Yes No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval
Bonner, Melissa
5/4/2021 10:48:19 AM

Budget and Finance Approval
Baker, Walter
5/4/2021 12:49:50 PM

Approved Funding _____

Approved Invoices to Date _____

Available Funding \$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 11:50:54 AM

Inv. 034

Give us feedback @ survey.walmart.com
Thank you! ID #:7QBF0ZLXYJZ



Save money. Live better.

843-763-5554 Mgr: JASON
3951 W ASHLEY CIR
CHARLESTON SC 29414

ST# 01748 OP# 000193 TE# 52 TR# 05921
 ** RETRIEVED TRANSACTION 48519459409 *
 MAG FILE HOL 694147116296 5.88 X
 MAG FILE HOL 694147116296 5.88 X
 RS 60 BLK 007033013162 6.47 X
 SH HL CHISEL 007164115824 7.38 X
 RS 60 BLK 007033013162 6.47 X
 RS 60 BLK 007033013162 6.47 X
 3-PACK NARR 007865240711 1.00 X
 3-PACK NARR 007865240711 1.00 X
 PEN CUP BK 697091481011 2.97 X
 PEN CUP BK 697091481011 2.97 X
 PEN CUP BK 697091481011 2.97 X
 PEN CUP BK 697091481011 2.97 X
 HARDBOARD 2 004435700120 3.24 X
 HARDBOARD 2 004435700120 3.24 X
 HARDBOARD 2 004435700120 3.24 X
 HARDBOARD 2 004435700120 3.24 X

** RETRIEVED ITEMS COMPLETE *
 SUBTOTAL 65.39
 TAX 1 9.000 % 5.89
 TOTAL 71.28
 DEBIT TEND 71.28
 CHANGE DUE 0.00

EFT DEBIT PAY FROM PRIMARY
 71.28 TOTAL PURCHASE

US Debit **** * 1031 I 0

REF # 107800676383

NETWORK ID. 0090 APPR CODE 710023

US Debit

AID A0000000042203

AAC B6EDBDD138DE9D35

TERMINAL # SC010912

03/19/21 12:22:07

ITEMS SOLD 16

TC# 1464 3362 0774 1493 3116



Introducing Walmart+

Join today at walmart.com/plus

Low Prices You Can Trust. Every Day.

03/19/21 12:22:13



Providers VAX Secure Invoice Upload

Tracking Number

418

Date

5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

OTH-VAX-237 Contract Number (required)	The Palmetto Palace * Contractor Name	20-4940283 * Tax ID	7000242891 * SCEIS Number
Dr. Youlanda Gibbs Contact (Full Name)	Executive Director Title	(843) 532-3169 Phone	thepalmettopalace@gmail.com Contact EMAIL
6265 Dorchester Road Fire Station 5 * Address	North Charleston * STE #	SC * City	29418 * State * Zip

INVOICE NUMBER	INVOICE AMOUNT
034	71.28

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Walmart \$71.28.Invoice 034pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
 5/1/2021 1:37:47 PM

\$71.28
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
 5/4/2021 10:19:10 AM

Budget and Finance Approval

Baker, Walter
 5/4/2021 12:59:12 PM

Approved Funding _____

Approved Invoices to Date _____

Available Funding **\$0.00**

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
 5/6/2021 12:01:10 PM



Deborat

Iny. 035

Payment Confirmation

1 message

SelectPay@selective.com <SelectPay@selective.com>

Reply-To: SelectPay@selective.com

To: deboraheuland@gmail.com

Dear Customer

Thank you for using Selective's One Time Payment service.

This is to confirm your authorization for an electronic payment to Selective Insurance America in the amount of \$1,008.00 on 04/03/2021 02:31 PM for bill account # 536

This payment will be deducted from your MasterCard account ending in 7143.

Your confirmation number is 20210403398953749.

If you have a question about your payment, please call our customer service center for assistance.

Sincerely,

Customer Service

Selective Insurance Company of America Company of America

UNIVERSITY OF CALIFORNIA
LIBRARY

UNIVERSITY OF CALIFORNIA
LIBRARY

UNIVERSITY OF CALIFORNIA
LIBRARY

UNIVERSITY OF CALIFORNIA
LIBRARY

UNIVERSITY OF CALIFORNIA
LIBRARY

UNIVERSITY OF CALIFORNIA
LIBRARY

UNIVERSITY OF CALIFORNIA
LIBRARY

<https://mail.google.com/mail/u/0?ik=47bb7ce6ca&view=pt&search=all&permthid=thread-f%3A169604528>



Providers VAX Secure Invoice Upload

Tracking Number

 Date

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u> Contract Number (required)	<u>The Palmetto Palace</u> * Contractor Name	<u>20-4940283</u> * Tax ID	<u>7000242891</u> * SCEIS Number
<u>Dr. Youlanda Gibbs</u> Contact (Full Name)	<u>Executive Director</u> Title	<u>(843) 532-3169</u> Phone	<u>thepalmettopalace@gmail.com</u> Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u> * Address	<u></u> * STE #	<u>North Charleston</u> * City	<u>SC 29418</u> * State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>035</u>	<u>1,008.00</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 1:42:44 PM

\$1,008.00
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 10:19:51 AM

Budget and Finance Approval

Baker, Walter
5/4/2021 1:37:39 PM

Approved Funding _____

Approved Invoices to Date _____

Available Funding \$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 3:07:39 PM

Inv: 036
Gmail

Deborah Euland <deboraeuland@gmail.com>

Payment Confirmation

1 message

SelectPay@selective.com <SelectPay@selective.com>

Sat, Mar 6, 2021 at 4:10 PM

Reply-To: SelectPay@selective.com

To: deboraheuland@gmail.com

Dear Customer

Thank you for using Selective's One Time Payment service.

This is to confirm your authorization for an electronic payment to Selective Insurance Company of America Company of America in the amount of \$1,014.00 on 03/06/2021 04:09 PM for bill account # 536183365.

This payment will be deducted from your MasterCard account ending in 7143.

Your confirmation number is 20210306397654255.

If you have a question about your payment, please call our customer service center at (800) 777-9656, x1400 for assistance.

Sincerely,

Customer Service
Selective Insurance Company of America Company of America



Providers VAX Secure Invoice Upload

Tracking Number

420

Date

5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

OTH-VAX-237

Contract Number (required)

The Palmetto Palace

* Contractor Name

20-4940283

* Tax ID

7000242891

* SCEIS Number

Dr. Youlanda Gibbs

Contact (Full Name)

Executive Director

Title

(843) 532-3169

Phone

EXT

thepalmettopalace@gmail.com

Contact EMAIL

6265 Dorchester Road Fire Station 5

* Address

* STE #

North Charleston

* City

SC

* State

29418

* Zip

INVOICE NUMBER

036

INVOICE AMOUNT

1,014.00

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

MobileInsurance_Invoice036_030621

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 1:44:04 PM

\$1,014.00

Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 10:21:58 AM

Budget and Finance Approval

Baker, Walter
5/4/2021 1:11:58 PM

Approved Funding _____

Approved Invoices to Date _____

Available Funding

\$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 12:32:10 PM



Youlanda Gibbs <thepalmettopalace@gmail.com>

Your payment has been processed.

1 message

Verizon <VZWMail@ecrmemail.verizonwireless.com>
To: thepalmettopalace@gmail.com

Sat, May 1, 2021 at 1:46 PM

Thank you for your payment.



[Shop](#) [Support](#) [Sign In](#)

Hi, Youlanda

Thank you for your payment.

Your payment details are as follows:

Payment details

Account number ending in:	5320-00001
Payment Date:	05.01.2021
Payment amount:	\$279.67
Payment method:	Bank Account ending in 1950

[Sign in](#) at any time to view account details and transactions.

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Verizon Wireless, One Verizon Way, Mail Code: 180WVB, Basking Ridge, NJ 07920



Providers VAX Secure Invoice Upload

Tracking Number
421

Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u>	<u>The Palmetto Palace</u>	<u>20-4940283</u>	<u>7000242891</u>
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number
<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
Contact (Full Name)	Title	Phone EXT	Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
037	279.67

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Communications_050121_Invoice037

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
 5/1/2021 1:50:34 PM

\$279.67

Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
 5/4/2021 10:45:15 AM

Budget and Finance Approval

Baker, Walter
 5/4/2021 12:57:17 PM

Approved Funding _____

Approved Invoices to Date _____

Available Funding **\$0.00**

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
 5/6/2021 11:58:39 AM



Providers VAX Secure Invoice Upload

Tracking Number

Date

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u>	<u>The Palmetto Palace</u>	<u>20-4940283</u>	<u>7000242891</u>
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number
<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
Contact (Full Name)	Title	Phone EXT	Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>038</u>	<u>121.51</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 2:21:56 PM

\$121.51
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 10:20:35 AM

Budget and Finance Approval

Baker, Walter
5/4/2021 12:41:02 PM

Approved Funding _____

Approved Invoices to Date _____

Available Funding \$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 11:33:12 AM

SPINX #366
10696 DORCHESTER RD
SUMMERVILLE, SC

INV. 039

Invoice# 0092395
Trans # 0900-2395
Date 04/24/2021
Time 05:50 PM

Pump	Quantity	Price
21	25.464	2.759

Product	Amount
DIESEL2	70.26

TOTAL 70.26

CREDIT CARD

DISCOVER 70.26

CARD# ICR

XXXXXXXXXXXX0879

AUTH # 02489R

RESPONSE:

APPROVED, Auth

#:02489R,

Amount:USD\$70.26,

Sequence #:72336,

MID:529822,

TID:002

TRANSACTION TYPE

SALE

THANK YOU!



Providers VAX Secure Invoice Upload

Tracking Number

424

Date

5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u>	<u>The Palmetto Palace</u>	<u>20-4940283</u>	<u>7000242891</u>
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number

<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
Contact (Full Name)	Title	Phone EXT	Contact EMAIL

<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>039</u>	<u>70.26</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

MobileFuel_Invoice39_70.26

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 2:25:18 PM

\$70.26
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 10:21:21 AM

Budget and Finance Approval

Baker, Walter
5/4/2021 1:24:36 PM

Approved Funding _____

Approved Invoices to Date _____

Available Funding \$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 2:19:45 PM

SPINX #366
10696 DORCHESTER RD
SUMMERVILLE, SC

Inv.040

Invoice# 0092394
Trans # 0900-2394
Date 04/24/2021
Time 05:45 PM

Pump	Quantity	Price
22	5.256	2.799

Product	Amount
DEFBULK	14.71

TOTAL 14.71

CREDIT CARD

DISCOVER 14.71

CARD# ICR

XXXXXXXXXXXX0879

AUTH # 02444R

RESPONSE:

APPROVED, Auth

#:02444R,

Amount:USD\$14.71,

Sequence #:72334,

MID:529822,

TID:002

TRANSACTION TYPE

SALE

THANK YOU!



Providers VAX Secure Invoice Upload

Tracking Number

425

Date

5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u>	<u>The Palmetto Palace</u>	<u>20-4940283</u>	<u>7000242891</u>
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number
<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
Contact (Full Name)	Title	Phone EXT	Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>040</u>	<u>14.71</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

MobileDef_Invoice040_14.71

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
 5/1/2021 2:26:36 PM

\$14.71
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
 5/4/2021 10:23:03 AM

Budget and Finance Approval

Baker, Walter
 5/5/2021 9:08:26 AM

Approved Funding _____

Approved Invoices to Date _____

Available Funding \$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
 5/6/2021 3:40:30 PM



Details for Order #114-6281276-2464258

Inv. 041

Order Placed: May 1, 2021

Amazon.com order number: 114-6281276-2464258

Order Total: \$719.40

Not Yet Shipped

Items Ordered	Price
6 Of: Sani-Cloth Q55172 Super Wipes Surface Disinfectant Germicidal Cloths High Alcohol Large Size, 160 Count, Pack of 4 Tubs (Bwo Back) Sold by: Johnson Distributors (seller profile) Condition: New	\$110.00

Shipping Address:

[Redacted Address]

United States

Shipping Speed:

Standard Shipping

Payment information

Payment Method: Bank Account Last digits: 950	Item(s) Subtotal: \$660.00
	Shipping & Handling: \$0.00
Billing address Youlanda Gibbs PO BOX 278 JOHNS ISLAND, SC 29457-0241 United States	----- Total before tax: \$660.00 Estimated Tax: \$59.40 -----
	Grand Total: \$719.40

To view the status of your order, return to [Order Summary](#) .



Providers VAX Secure Invoice Upload

Tracking Number

Date

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u> Contract Number (required)	<u>The Palmetto Palace</u> * Contractor Name	<u>20-4940283</u> * Tax ID	<u>7000242891</u> * SCEIS Number
<u>Dr. Youlanda Gibbs</u> Contact (Full Name)	<u>Executive Director</u> Title	<u>(843) 532-3169</u> Phone	<u>thepalmettopalace@gmail.com</u> Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u> * Address	<u></u> * STE #	<u>North Charleston</u> * City	<u>SC 29418</u> * State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>041</u>	<u>719.40</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 3:23:29 PM

\$719.40
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 10:23:57 AM

Budget and Finance Approval

Baker, Walter
5/5/2021 9:01:07 AM

Approved Funding

Approved Invoices to Date

Available Funding

\$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 3:19:25 PM



INV.042

Details for Order #114-5456040-4996238

Order Placed: May 1, 2021

Amazon.com order number: 114-5456040-4996238

Order Total: \$65.30

Not Yet Shipped

Items Ordered

Price

2 Of: iMBAPrice (2-Pack) 21" Long Traffic Safety Rechargeable Flashing LED Light Control Wand Baton Flashlight with Blinking and Steady-glow Flashing modes for Parking Guides

\$19.95

Sold by: AmaMax (USA) Since 1993 | iMBAPrice® Authorized Distributor ([seller profile](#))

Business Price

Condition: New

Shipping Address:

[Redacted]
[Redacted]
[Redacted]
United States

Shipping Speed:

Standard Shipping

Payment information

Payment Method:

Bank Account | Last digits: 950

Billing address

Youlanda Gibbs
PO BOX 278
JOHNS ISLAND, SC 29457-0241
United States

Item(s) Subtotal: \$39.90

Shipping & Handling: \$20.00

Total before tax: \$59.90

Estimated Tax: \$5.40

Grand Total: \$65.30

To view the status of your order, return to [Order Summary](#) .



Providers VAX Secure Invoice Upload

Tracking Number
429
 Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u>	<u>The Palmetto Palace</u>	<u>20-4940283</u>	<u>7000242891</u>
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number
<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
Contact (Full Name)	Title	Phone EXT	Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>042</u>	<u>65.30</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

AddSupplies_Invoice042.65.30

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 3:24:52 PM

\$65.30
 Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 10:24:50 AM

Budget and Finance Approval

Baker, Walter
5/5/2021 9:06:49 AM

Approved Funding

Approved Invoices to Date

Available Funding

\$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 3:38:06 PM



Details for Order #114-4364194-1386638

Inv. 043

Order Placed: May 1, 2021

Amazon.com order number: 114-4364194-1386638

Order Total: \$356.63

Not Yet Shipped

Items Ordered	Price
2 Of: <i>BIC PENS Large Bulk Pack of 240 Ink Pens, Bic Round Stic Xtra Life Ballpoint Pens Medium point 1.0 mm, 120 Black Pens & 120 Blue Pens in Box Combo Pack</i> Sold by: Prime Office Supplies (seller profile) Product question? (Ask Seller) Business Price Condition: New	\$23.62
1 Of: <i>MedPride Powder-Free Nitrile Exam Gloves, X-Large, Box/100</i> Sold by: HLmedical (seller profile) Business Price Condition: New	\$24.37
3 Of: <i>Nitrile Medical Exam Gloves, 3.5 Mil, D6319, Powder Free, Food Safe, Box/100 - Small</i> Sold by: Vertical Entry (seller profile) Business Price Condition: New	\$24.65
3 Of: <i>MedPride Powder-Free Nitrile Exam Gloves, Medium, Box/100</i> Sold by: HLmedical (seller profile) Business Price Condition: New	\$24.37
3 Of: <i>MedPride Powder-Free Nitrile Exam Gloves, Large, Box/100</i> Sold by: HLmedical (seller profile) Business Price Condition: New	\$24.37
5 Of: <i>I Got My Covid 19 Vaccine Stickers - US Flag Design - 1.5 Inch Diameter - 500 Labels per roll</i> Sold by: ITACH (seller profile) Product question? (Ask Seller) Business Price Condition: New	\$7.08

Shipping Address:
 [Redacted]
 [Redacted]
 [Redacted]
 United States

Shipping Speed:
 FREE Shipping

Payment information

Payment Method:
 Bank Account | Last digits: 950

Item(s) Subtotal: \$327.18
 Shipping & Handling: \$13.78



Providers VAX Secure Invoice Upload

Tracking Number

430

Date

5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

OTH-VAX-237 Contract Number (required)	The Palmetto Palace * Contractor Name	20-4940283 * Tax ID	7000242891 * SCEIS Number
Dr. Youlanda Gibbs Contact (Full Name)	Executive Director Title	(843) 532-3169 Phone	thepalmettopalace@gmail.com Contact EMAIL
6265 Dorchester Road Fire Station 5 * Address	North Charleston * STE #	North Charleston * City	SC 29418 * State * Zip

INVOICE NUMBER	INVOICE AMOUNT
043	356.63

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 3:26:26 PM

\$356.63 Invoice Total	<input checked="" type="radio"/> Yes <input type="radio"/> No
----------------------------------	--

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval <i>Bonner, Melissa</i> 5/4/2021 10:25:27 AM	Budget and Finance Approval <i>Baker, Walter</i> 5/4/2021 1:35:19 PM	Approved Funding
		Approved Invoices to Date
		Available Funding \$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 2:58:17 PM



Final Details for Order #114-8308105-7884234

Inv. 044

Order Placed: April 5, 2021

Amazon.com order number: 114-8308105-7884234

Order Total: \$385.86

Shipped on April 6, 2021	
Items Ordered	Price
3 of: Sani-Cloth Q55172 Super Wipes Surface Disinfectant Germicidal Cloths High Alcohol Large Size, 160 Count, Pack of 4 Tubs (Тwo Рack) Sold by: Johnson Distributors (seller profile) Condition: New	\$118.00
Shipping Address: [REDACTED] [REDACTED] United States	Item(s) Subtotal: \$354.00 Shipping & Handling: \$0.00 ----- Total before tax: \$354.00 Sales Tax: \$31.86 -----
Shipping Speed: Standard Shipping	Total for This Shipment: \$385.86 -----

Payment information	
Payment Method: MasterCard Last digits: 7143	Item(s) Subtotal: \$354.00 Shipping & Handling: \$0.00 -----
Billing address THE PALMETTO PALACE, INC. PO BOX 278 JOHNS ISLAND, SC 29457-0278 United States	Total before tax: \$354.00 Estimated Tax: \$31.86 ----- Grand Total: \$385.86
Credit Card transactions	MasterCard ending in 7143: April 6, 2021: \$385.86

To view the status of your order, return to [Order Summary](#) .



Providers VAX Secure Invoice Upload

Tracking Number
431

Date
5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

OTH-VAX-237 **The Palmetto Palace** **20-4940283** **7000242891**
 Contract Number (required) * Contractor Name * Tax ID * SCEIS Number

Dr. Youlanda Gibbs **Executive Director** **(843) 532-3169** **thepalmettopalace@gmail.com**
 Contact (Full Name) Title Phone EXT Contact EMAIL

6265 Dorchester Road Fire Station 5 **North Charleston** **SC** **29418**
 * Address * STE # * City * State * Zip

INVOICE NUMBER	INVOICE AMOUNT
044	385.86

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

ReplacementSupplies4_Invoice044_385.86

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
 5/1/2021 3:29:44 PM

\$385.86
 Invoice Total Yes No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
 5/4/2021 10:26:08 AM

Budget and Finance Approval

Baker, Walter
 5/4/2021 1:25:24 PM

Approved Funding

Approved Invoices to Date

Available Funding

\$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
 5/6/2021 2:24:37 PM



Inv 045

Details for Order #114-0019331-8188227

Order Placed: May 1, 2021

Amazon.com order number: 114-0019331-8188227

Order Total: \$63.98

Not Yet Shipped

Items Ordered	Price
3 Of: SanitizeRx Hand Sanitizer 75% Alcohol Hand Sanitizer Gel with Pump for Easy Dispensing - Antibacterial Hand Sanitizer (16 Ounces, 4-Pack) Sold by: Zoom1001 (seller profile) Business Price Condition: New	\$14.95

Shipping Address:  United States
Shipping Speed: Standard Shipping

Payment information

Payment Method: Bank Account Last digits: 950	Item(s) Subtotal: \$44.85 Shipping & Handling: \$13.84 -----
Billing address Youlanda Gibbs PO BOX 278 JOHNS ISLAND, SC 29457-0241 United States	Total before tax: \$58.69 Estimated Tax: \$5.29 -----
	Grand Total: \$63.98

To view the status of your order, return to [Order Summary](#) .



Providers VAX Secure Invoice Upload

Tracking Number

432

Date

5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

<u>OTH-VAX-237</u>	<u>The Palmetto Palace</u>	<u>20-4940283</u>	<u>7000242891</u>
Contract Number (required)	* Contractor Name	* Tax ID	* SCEIS Number
<u>Dr. Youlanda Gibbs</u>	<u>Executive Director</u>	<u>(843) 532-3169</u>	<u>thepalmettopalace@gmail.com</u>
Contact (Full Name)	Title	Phone EXT	Contact EMAIL
<u>6265 Dorchester Road Fire Station 5</u>	<u>North Charleston</u>	<u>SC</u>	<u>29418</u>
* Address	* STE #	* City	* State * Zip

INVOICE NUMBER	INVOICE AMOUNT
<u>045</u>	<u>63.98</u>

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

ReplacemntSupplies3_Invoice045

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 3:31:21 PM

\$63.98
Invoice Total

Yes
 No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 10:26:58 AM

Budget and Finance Approval

Baker, Walter
5/4/2021 12:38:03 PM

Approved Funding

Approved Invoices to Date

Available Funding

\$0.00

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 11:27:39 AM



Inv. 046

Details for Order #114-6490798-5244217

Order Placed: May 1, 2021

Amazon.com order number: 114-6490798-5244217

Order Total: \$65.38

Not Yet Shipped	
Items Ordered	Price
2 of: <i>Allstate B2B 3-Year Portable Electronics Accidental Protection Plan (\$200-249.99)</i>	\$29.99
Sold by: Allstate Protection Plans (seller profile)	
Condition: New	
Shipping Address:	
[Redacted]	
[Redacted] 712	
United States	
Shipping Speed:	
Expedited Shipping	

Payment information	
Payment Method:	Item(s) Subtotal: \$59.98
Bank Account Last digits: 950	Shipping & Handling: \$0.00
Billing address	-----
Youlanda Gibbs	Total before tax: \$59.98
PO BOX 278	Estimated Tax: \$5.40
JOHNS ISLAND, SC 29457-0241	-----
United States	Grand Total: \$65.38

To view the status of your order, return to [Order Summary](#) .



Providers VAX Secure Invoice Upload

Tracking Number

433

Date

5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

OTH-VAX-237 Contract Number (required)	The Palmetto Palace * Contractor Name	20-4940283 * Tax ID	7000242891 * SCEIS Number	
Dr. Youlanda Gibbs Contact (Full Name)	Executive Director Title	(843) 532-3169 Phone	EXT	thepalmettopalace@gmail.com Contact EMAIL
6265 Dorchester Road Fire Station 5 * Address	* STE #	North Charleston * City	SC * State	29418 * Zip

INVOICE NUMBER	INVOICE AMOUNT
046	65.38

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

ProtectionPlan_Communications_Invoice046..65.38

▲
▼

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 3:32:31 PM

\$65.38

Invoice Total Yes No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 10:27:59 AM

Budget and Finance Approval

Baker, Walter
5/4/2021 1:15:29 PM

Approved Funding

Approved Invoices to Date

Available Funding **\$0.00**

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 12:45:02 PM

Inv. 414

Member to Best Buy #1120
13975 W. 42ND STREET, BLVD
CHESAPEOTE, VA 29407



VAL: 10/04/20 553929-16121-245121-581627-42477

11/20 056 7812 14 16121 14 04

6402497	MSFT OFF 36	0.00
	MSFT 365 FAMILY 1YR DIG CARD	
	0.00 TTS S2 BNDL :	
	Sales Tax	0.00
6258038	AAA-04974	79.99
	MSFT 365 FAMILY 1-YR AP DIG	
	99.99 was Price	
	20.00 TTS S2 BNDL :	
	Sales Tax	0.00

Subtotal	79.99
Sales Tax	0.00

Total: 79.99

*****4739 ChipRead USD\$ 79.99
US DEBIT - DEBIT
PALACE THE PALMETTO
Approval 001176
Verified By PIN

CARD ENTRY: Chip
MODE: Issuer
AID: A0000000042203
Reference Number: 55514042213891

Today's Total Tech Savings:	20.00
Total Savings:	20.00

My Best Buy
Member ID 4575613245

Go to microsoft365.com/setup to activate subscription using the product key below:
3PWG4-79G36-R9VQW-RFWVV-7CF0Z

You have purchased an automatically renewing Microsoft 365 Family subscription. Advance notice of your renewal, including any price change, will be sent to the email address you provided. Your chosen credit card will be charged \$99.99 (or the then-current price) plus tax on your yearly renewal date unless you cancel before then by calling 1-888-BESTBUY or you turn off automatic renewals online through the Plans & Subscriptions page. You may have received a promotional discount on the first year of your subscription as indicated on this receipt. Your subscription is subject to full Terms and Conditions available at BestBuy.com/PlanTerms.

YOULANDA,

Thanks for shopping at Best Buy today!
Your My Best Buy balance as of 11/12/2020
Posted points 224
Go to BestBuy.com for more info



Providers VAX Secure Invoice Upload

Tracking Number

414

Date

5/1/2021

Contract Information

Please enter the contract number first to automatically populate the fields listed with an asterisk (*) Please note that these fields are "Read Only" and edits are not permitted on the form.

OTH-VAX-237	The Palmetto Palace	20-4940283	7000242891
<small>Contract Number (required)</small>	<small>* Contractor Name</small>	<small>* Tax ID</small>	<small>* SCEIS Number</small>

Dr. Youlanda Gibbs	Executive Director	(843) 532-3169	thepalmettopalace@gmail.com
<small>Contact (Full Name)</small>	<small>Title</small>	<small>Phone</small>	<small>EXT Contact EMAIL</small>

6265 Dorchester Road Fire Station 5	North Charleston	SC	29418
<small>* Address</small>	<small>* STE # * City</small>	<small>* State</small>	<small>* Zip</small>

INVOICE NUMBER	INVOICE AMOUNT
414	79.99

Please Upload Invoice for Payment Review

To ensure prompt processing of your invoice ensure that you include the invoice number in the file name that you upload. Please ensure that all required information is included on the invoice. Click below for more details

Secure Document Upload

Please upload the invoice PDF to our secure website using the buttons below.

Supplies(\$79.99)_BestBuy.Invoice030pdf

I certify that no other funds have been received or will be reimbursed by any other source for the amounts claimed on this invoice

Signature (required) Click to Sign

Dr. Youlanda Gibbs
5/1/2021 1:25:16 PM

\$79.99 Yes
 Invoice Total No

The attached invoice is accurate and the invoice total is correct.

ACC Testing Approval

Bonner, Melissa
5/4/2021 10:47:04 AM

Budget and Finance Approval

Baker, Walter
5/5/2021 9:00:14 AM

Approved Funding _____

Approved Invoices to Date _____

Available Funding **\$0.00**

Payment Processing Instructions

Documentation of expenditures only. No payment needed

Accounts Payable Approval

Robinson, Sharon D.
5/6/2021 3:17:03 PM