INVOICE

Veit Disposal Systems - Metro
14000 Veit Place
Rogers, MN 55374
Phone: (763) 428-2242
Fax: (763) 428-1334

INVOICE NO.	0000380669
PAGE	1
DATE	Nov-13-11
CUSTOMER NO.	10262
SITE NO.	11
REFERENCE NO.	

NORTH REAL ESTATE -MAIL INVOICE-CC
902 ARCADE ST
ST PAUL, MN 55106

TOTAL INVOICE	$386.00

SERVICE DATE	CODE	DESCRIPTION	REFERENCE	QTY.	RATE	AMOUNT
		(0011) NORTH REAL ESTATE -EMAIL INVOICE-CC 482 EDMUND AVE, ST PAUL MN				
		Serv #001 Roll Off Service 30.00				
10 - Nov	R1 30.00	Exchange W/O #:337646	od cc 386 11-10-11	1.00	$342.00	$342.00
10 - Nov	C1	Const. Debris - YD Bill of Lading: 1 30 60019097	ST-54213	30.00	$0.00	$0.00
10 - Nov	F3	Fuel Surcharge	F3-1053	1.00	($2.00)	($2.00)
10 - Nov	FS	Fuel Surcharge	SC125162			$28.00
10 - Nov	01	MN Sld Waste Fee-$.60/Yd at $0.60/YD on 30.00YD				$18.00

Billing or Invoices by Email Call: Diana (763) 428-6726 or dmanthei@veitusa.com

A SERVICE CHG OF 1.5% PER MTH 18 APR ON ANY UNPAID BALANCES AFTER 30 DAYS

CURRENT	31 - 60 DAYS	61 - 90 DAYS	OVER 90 DAYS
($776.00)	$0.00	$0.00	$0.00

TOTAL INVOICE	$386.00

HP LaserJet *M1522nf MFP*

Fax Error Report

HP LASERJET FAX
6517780639
Jun-2-2012 12:34

Job	Date	Time	Type	Identification	Duration	Pages	Result
5537	6/ 2/2012	12:32:58	Send	011529515494944	0:00	0	No answer

PLS RETURN IN 10 DAYS

SECOND REQUEST

6232

Representative Payee Report

Social Security Administration, P.O. Box 6383, Wilkes-Barre, PA 18767-8979

FORM APPROVED
OMB NO. 0960-0068

PAYEE'S NAME AND ADDRESS

M02-0016964 ********MIXED AADC 160
AMANDA CABRERA JARQUIN
FOR KARIME Y CABRERA
APT 351
380 E WILOC PKWY
C/O ANTIA CORTEZ
ST PAUL, MN 55130-0

REPORT PERIOD
FROM 09/01/2010 TO 08/31/2011

SOCIAL SECURITY NUMBER
512-77-1818

BENEFICIARY
KARIME Y CABRERA

CI N OTH PYE N 5 677

000000 007752 416-37-5871

5727716361201500000077522716
08201124291725341446833634911719

If change of address, check box and enter new address on back of report. ☐

This report is about the benefits you received between 09/01/2010 and 08/31/2011 for the beneficiary, KARIME Y CABRERA. Please read the enclosed instructions before completing this form to help you answer each question. If you have already returned a report with the same report period as shown above, discard this report.

1. Were you (the payee) convicted of a crime considered to be a felony between 09/01/2010 and 08/31/2011? If YES, please explain in REMARKS on the back of this form. YES ☐ NO ☐

2. Did the beneficiary continue to live alone, or with the same person, or in the same institution from 09/01/2010 to 08/31/2011? If NO, please explain and provide the beneficiary's current address in REMARKS on the back of this form. ☐ ☐

3. Benefits paid to you between 09/01/2010 and 08/31/2011 = $ 7,752
Benefits you reported as saved on last year's report. = $ 0
Total Accountable Amount = $ 7,752

A. Did you (the payee) decide how the $7,752 was spent or saved? If NO, please explain in REMARKS on the back of this form. → YES ☐ NO ☐

DOLLAR AMOUNT (NO CENTS)

B. How much of the $7,752 did you spend for the beneficiary's food and housing between 09/01/2010 and 08/31/2011? → ☐☐☐,☐☐☐

C. How much of $7,752 did you spend on other things for the beneficiary such as clothing, education, medical and dental expenses, recreation, or personal items between 09/01/2010 and 08/31/2011? → ☐☐☐,☐☐☐

D. How much, if any, of the $7,752 did you save for the beneficiary as of 08/31/2011? If none, show zeros → ☐☐☐,☐☐☐

4. If you showed an amount in 3.D. above, place an "X" in the boxes below to show how you are saving the benefits. If you have more than one account, you may mark more than one box in each section.

A. TYPE OF ACCOUNT

Savings/ Checking Account	U.S. Savings Bonds	Certificates of Deposit	Collective Savings/ Checking Account	Treasury Bills	Other
☐	☐	☐	☐	☐	☐

B. TITLE OF ACCOUNT

Beneficiary's Name by Your Name	Your Name for Beneficiary's Name	Other
☐	☐	☐

Continued on the Reverse →

FORM SSA-623-OCR-SM (06-2007)

Veit Disposal Systems - Metro
14000 Veit Place
Rogers, MN 55374
Phone: (763) 428-2242
Fax: (763) 428-1334

INVOICE

INVOICE NO.	0000385083
PAGE	1
DATE	Feb-19-12
CUSTOMER NO.	10262
SITE NO.	11
REFERENCE NO.	

NORTH REAL ESTATE -MAIL INVOICE-CC
902 ARCADE ST
ST PAUL, MN 55106

TOTAL INVOICE	$401.00

SERVICE DATE	CODE	DESCRIPTION	REFERENCE	QTY.	RATE	AMOUNT
		(0011) NORTH REAL ESTATE -EMAIL INVOICE-CC 482 EDMUND AVE, ST PAUL MN				
		Serv #001 Roll Off Service 30.00				
15 - Feb	R1 30.00	Pick-up W/O #:344514	pd $401.00	1.00	$357.00	$357.00
15 - Feb	CN	Const Debris Tons/Yds Bill of Lading: 3 30 40124951	CT-163290	30.00	$0.00	$0.00
15 - Feb	FS	Fuel Surcharge	SC127585			$26.00
15 - Feb	01	MN Sld Waste Fee-$.60/Yd at $0.60/YD on 30.00YD				$18.00

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A SERVICE CHG OF 1.5% PER MTH 18 APR ON ANY UNPAID BALANCES AFTER 30 DAYS

CURRENT	31 - 60 DAYS	61 - 90 DAYS	OVER 90 DAYS
($776.00)	$0.00	$0.00	$0.00

TOTAL INVOICE	$401.00

TRANSACTION RECORD

Veit Disposal Systems - Metro
14000 Veit Place

Rogers, MN 55374
(763) 428-2242

Invoice #:	O A
Invoice Date:	05/31/2012
Payment Transaction Date:	5/31/2012 2:20:05PM
Credit Card #:	************2007
Credit Card Type:	American Express Card
Transaction Amount:	$388.00
Authorization code:	174315 (TransactionID: 23962372)

Veit Disposal Systems - Metro
TAlex 05/31/2012 02:20 PM