

PAYMENT VOUCHER & PURCHASE ORDER

P.O. #: 170331

DATE: 01/09/07



** Note: For Payment Sign and
Return This Purchase Order To:

COUNTY OF ESSEX
ACCOUNTS PAYABLE RM 546
465 DR. MLK JR BLVD
NEWARK, NJ 07102

1080049
RICHARD*CHILDS CPA CFE
PO BOX 2944
WESTFIELD, NJ 07090

INVOICE & SHIP TO:

COUNTY OF ESSEX
COUNTY COUNSEL
HALL OF RECORDS RM 530
465 DR MARTIN L KING BLVD
NEWARK, NJ 07102

VENDOR #
14422

DELIVER BY:
01/15/07

SHIP VIA:
BEST WAY

F.O.B.
DESTINATION

TERMS
NET

CONFIRM BY

CONFIRM TO
SIGN & RETURN FOR PAYMENT

REQUISITIONED BY
JL-STaub-CC-7-0009

FREIGHT

CONTRACT NO.

ACCOUNT NO.

PROJECT

REQ. NO.

REQ. DA'

101-1400-414.45-00

2007

175564

01/08/07

LINE#	QUANTITUOM	ITEM NO. AND DESCRIPTION	UNIT COST	EXTENDED COST
1	1.0EA	961 050 PROFESSIONAL SERVICES RE: INVESTIGATIONS OF INDIVIDUALS ADMITTED TO THE ESSEX COUNTY HOSPITAL CENTER AND OTHER STATE MENTAL INSTITUTIONS FOR THE MENTALLY ILL D/S JANUARY 1, 2007 THROUGH DECEMBER 31, 2007 RFP#06-304 SPECIAL PROCESSING ADOPTED - RESOLUTION #R-06-0893 CERTIFICATION # 3011	40000.0000	40000.00
			SUB-TOTAL	40000.00
			TOTAL	40000.00

CERTIFICATION OF RECEIPT OF GOODS / SERVICES

I CERTIFY THAT THE ABOVE ITEMS WERE RECEIVED IN GOOD CONDITION OR THAT SERVICES WERE RENDERED IN A SATISFACTORY MANNER IN ACCORDANCE WITH SPECIFICATIONS OR PROPOSAL.

AUTHORIZED SIGNATURE: _____

AUTHORIZED BY _____

FIRM	FILE	RES. #	REQ. #	P.O. #	DATE	AMOUNT	EXPENDED	BALANCE
Richard Childs, CPA,CFE	County Adjuster Investigations	R-06-0893		170331	1/1/2007	40,000.00		40,000.00
#1					1/31/2007		11,530.00	28,470.00
#2					3/2/2007		2,615.00	25,855.00
#3					3/27/2007		2,430.00	23,425.00
#4					4/27/2007		2,520.00	20,905.00
#5					5/30/2007		3,550.00	17,355.00
#6					6/25/2007		2,350.00	15,005.00
#7					7/31/2007		6,290.00	8,715.00
#8					9/4/2007		2,750.00	5,965.00
#9					9/24/2007		4,040.00	1,925.00
#10					11/15/2007		1,795.00	130.00
#11 FINAL					12/5/2007		125.00	5.00

25,995.00

VOUCHER FOR PARTIAL PAYMENT

PURCHASE ORDER NUMBER

DATE

1 7 0 3 3 1

1 2 0 5 0 7

DEPARTMENT / DIVISION: County Counsel

VENDOR NAME / ADDRESS: Richard Childs, CPA, CFE, P.O. Box 2944, Westfield, NJ 07090

Account Number

2 0 0 7 1 0 1 1 4 0 0 4 1 4 4 5 0 0

Payment #

Final

Partial

Project #

Vendor #

0 1 1

X

1 4 4 2 2

QUANTITY	ITEM #	DESCRIPTION	UNIT PRICE	AMOUNT
		Professional Services - Re: Investigations of Individuals Admitted To The Essex County Hospital Center And Other State Institutions For The Mentally ILL - D/S November, 2007	\$125.00	\$125.00

RECEIVING REPORT
RETAIN A COPY FOR YOUR RECORDS

TOTAL AMOUNT \$125.00

Certification of Receipt of Goods / Services

I certify that the above items were received in good condition or that services were rendered in a satisfactory manner in accordance with specifications or proposal.

SIGN HERE

R. Staub

DATE

12/6/07

RICHARD CHILDS

Certified Public Accountant

Certified Fraud Examiner

P.O. Box 2944, Westfield, NJ 07091

Phone (908) 789-2202 • Fax (908) 789-2252

December 3, 2007

County of Essex
County Counsel's Office
Martin Luther King Blvd.
Newark, NJ

Re: ESSEX COUNTY ADJUSTER'S INVESTIGATIONS

FOR PROFESSIONAL SERVICES RENDERED:

The following matter were investigated and submitted to the County Adjuster during the month of November 2007:

C-20482 Aswani, Nand-ECHC

Balance due and owing

\$125

12/3/07
OK
pay money

VOUCHER FOR PARTIAL PAYMENT

PURCHASE ORDER NUMBER

DATE

1 7 0 3 3 1

1 1 1 5 0 7

DEPARTMENT / DIVISION: County Counsel

VENDOR NAME / ADDRESS: Richard Childs, CPA, CFE, P.O. Box 2944, Westfield, NJ 07090

Account Number

2 0 0 7 1 0 1 1 4 0 0 4 1 4 4 5 0 0

Payment #

Final Partial

Project #

Vendor #

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QUANTITY	ITEM #	DESCRIPTION	UNIT PRICE	AMOUNT
		Professional Services - Re: Investigations of Individuals Admitted To The Essex County Hospital Center And Other State Institutions For The Mentally ILL - D/S October, 2007	\$1,795.00	\$1,795.00
RECEIVING REPORT RETAIN A COPY FOR YOUR RECORDS			TOTAL AMOUNT	\$1,795.00

Certification of Receipt of Goods / Services

I certify that the above items were received in good condition or that services were rendered in a satisfactory manner in accordance with specifications or proposal

SIGN HERE.....

K. Stuebel

DATE.....

11/15/07

RICHARD CHILDS

Certified Public Accountant

Certified Fraud Examiner

P.O. Box 2944, Westfield, NJ 07091
Phone (908) 789-2202 • Fax (908) 789-2252

November 11, 2007

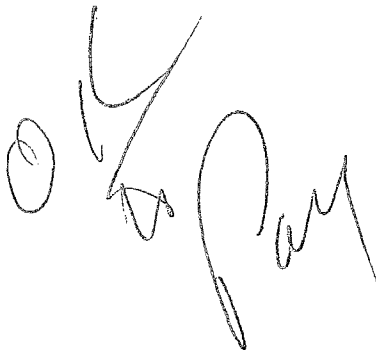
Essex County Counsel
Hall of Records, Room 530
Newark, NJ 07102

Re: County Adjuster Investigations, October 2007

FOR PROFESSIONAL SERVICES RENDERED:

Investigations performed for the month of October 2007 (see attached list)

14 investigations @ \$125 per case	\$1,750
1 re-admission @\$45 per case	<u>45</u>
Balance due and owing	<u>\$1,795</u>



VOUCHER FOR PARTIAL PAYMENT

PURCHASE ORDER NUMBER

DATE

1 7 0 3 3 1

0 9 2 4 0 7

DEPARTMENT / DIVISION: County Counsel

Richard Childs, CPA, CFE, P.O. Box 2944, Westfield, NJ 07090

VENDOR NAME / ADDRESS: _____

Account Number

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Payment #

Final

Partial

Project #

Vendor #

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1 4 4 2 2

QUANTITY	ITEM #	DESCRIPTION	UNIT PRICE	AMOUNT
		Professional Services - Re: Investigations of Individuals Admitted To The Essex County Hospital Center And Other State Institutions For The Mentally ILL - D/S September, 2007	\$4,040.00	\$4,040.00

RECEIVING REPORT
RETAIN A COPY FOR YOUR RECORDS

TOTAL
AMOUNT

\$4,040.00

Certification of Receipt of Goods / Services

I certify that the above items were received in good condition or that services were rendered in a satisfactory manner in accordance with specifications or proposal

SIGN HERE.....

K. Staub

DATE

9/25/07

RICHARD CHILDS

Certified Public Accountant

Certified Fraud Examiner

P.O. Box 2944, Westfield, NJ 07091
Phone (908) 789-2202 • Fax (908) 789-2252

September 24, 2007

Essex County Counsel
Hall of Records, Room 530
Newark, NJ 07102

Re: County Adjuster Investigations, September 2007

FOR PROFESSIONAL SERVICES RENDERED:

Investigations performed for the month of Spetember 2007 (see attached list)

28 investigations @ \$125 per case	\$3,500
12 re-admissions @\$45 per case	<u>540</u>
Balance due and owing	<u>\$4,040</u>

9/24/07
OK
to
Ray Harvey

VOUCHER FOR PARTIAL PAYMENT

PURCHASE ORDER NUMBER

DATE

1 7 0 3 3 1

0 9 0 4 0 7

DEPARTMENT / DIVISION: County Counsel

VENDOR NAME / ADDRESS: Richard Childs, CPA, CFE, P.O. Box 2944, Westfield, NJ 07090

Account Number

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Payment #

Final Partial

Project #

Vendor #

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1 4 4 2 2

QUANTITY	ITEM #	DESCRIPTION	UNIT PRICE	AMOUNT
		Professional Services - Re: Investigations of Individuals Admitted To The Essex County Hospital Center And Other State Institutions For The Mentally ILL - D/S August, 2007	\$2,750.00	\$2,750.00
RECEIVING REPORT <u>RETAIN A COPY FOR YOUR RECORDS</u>			TOTAL AMOUNT	\$2,750.00

Certification of Receipt of Goods / Services

I certify that the above items were received in good condition or that services were rendered in a satisfactory manner in accordance with specifications or proposal

SIGN HERE

K. Staub

DATE

9/4/07

RICHARD CHILDS

Certified Public Accountant

Certified Fraud Examiner

P.O. Box 2944, Westfield, NJ 07091
Phone (908) 789-2202 • Fax (908) 789-2252

August 29, 2007

County of Essex
County Counsel's Office
Martin Luther King Blvd.
Newark, New Jersey

Re: Essex County Adjuster's Investigations-August 2007

FOR PROFESSIONAL SERVICES RENDERED

(See attached list)

New admission investigations 22 @ \$125 per file

\$2,750

9/4/07
OK.
to
pay

VOUCHER FOR PARTIAL PAYMENT

PURCHASE ORDER NUMBER

DATE

1 7 0 3 3 1

0 7 3 1 0 7

DEPARTMENT / DIVISION: County Counsel

Richard Childs, CPA, CFE, P.O. Box 2944, Westfield, NJ 07090

VENDOR NAME / ADDRESS: _____

Account Number

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Payment #

Final

Partial

Project #

Vendor #

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QUANTITY	ITEM #	DESCRIPTION	UNIT PRICE	AMOUNT
		Professional Services - Re: Investigations of Individuals Admitted To The Essex County Hospital Center And Other State Institutions For The Mentally ILL - D/S July, 2007	\$6,290.00	\$6,290.00

RECEIVING REPORT
RETAIN A COPY FOR YOUR RECORDS

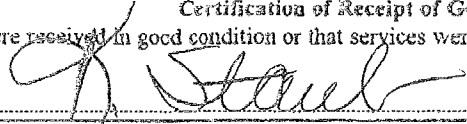
TOTAL
AMOUNT

\$6,290.00

Certification of Receipt of Goods / Services

I certify that the above items were received in good condition or that services were rendered in a satisfactory manner in accordance with specifications or proposal

SIGN HERE



DATE

8-1-07

RICHARD CHILDS

Certified Public Accountant

Certified Fraud Examiner

P.O. Box 2944, Westfield, NJ 07091

Phone (908) 789-2202 • Fax (908) 789-2252

July 24, 2007

Essex County Counsel
Hall of Records, Room 530
Newark, NJ 07102

Re: County Adjuster Investigations, July 24, 2007

FOR PROFESSIONAL SERVICES RENDERED:

Investigations performed for the month of ^{JULY}~~March~~ 2007 (see attached list)

46 investigations @ \$125 per case	\$5,750
12 re-admissions @ \$45 per case	<u>540</u>
Balance due and owing	<u>\$6,290</u>

OK
to pay
Manny

VOUCHER FOR PARTIAL PAYMENT

PURCHASE ORDER NUMBER

DATE

1 7 0 3 3 1

0 6 2 5 0 7

DEPARTMENT / DIVISION: County Counsel

VENDOR NAME / ADDRESS: Richard Childs, CPA, CFE, P.O. Box 2944, Westfield, NJ 07090

Account Number

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Payment #

Final Partial

Project #

Vendor #

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QUANTITY	ITEM #	DESCRIPTION	UNIT PRICE	AMOUNT
		Professional Services - Re: Investigations of Individuals Admitted To The Essex County Hospital Center And Other State Institutions For The Mentally ILL - D/S June, 2007	\$2,350.00	\$2,350.00
RECEIVING REPORT RETAIN A COPY FOR YOUR RECORDS			TOTAL AMOUNT	\$2,350.00

Certification of Receipt of Goods / Services

I certify that the above items were received in good condition or that services were rendered in a satisfactory manner in accordance with specifications or proposal

SIGN HERE

K. Staub

7/2/07

DATE

RICHARD CHILDS

Certified Public Accountant

Certified Fraud Examiner

P.O. Box 2944, Westfield, NJ 07091
Phone (908) 789-2202 • Fax (908) 789-2252

June 26, 2007

Essex County Counsel
Hall of Records, Room 530
Newark, NJ 07102

Re: County Adjuster Investigations, June 2007

FOR PROFESSIONAL SERVICES RENDERED:

Investigations performed for the month of June 2007 (see attached list)

17 investigations @ \$125 per case	\$2,125
5 re-admissions @\$45 per case	<u>225</u>
Balance due and owing	<u>\$2,350</u>

OK
to
pay

VOUCHER FOR PARTIAL PAYMENT

PURCHASE ORDER NUMBER

DATE

1 7 0 3 3 1

0 5 3 0 0 7

DEPARTMENT / DIVISION: County Counsel

Richard Childs, CPA, CFE, P.O. Box 2944, Westfield, NJ 07090

VENDOR NAME / ADDRESS: _____

Account Number

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Payment #

Final Partial

Project #

Vendor #

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1 4 4 2 2

QUANTITY	ITEM #	DESCRIPTION	UNIT PRICE	AMOUNT
		Professional Services - Re: Investigations of Individuals Admitted To The Essex County Hospital Center And Other State Institutions For The Mentally ILL - D/S May, 2007	\$3,550.00	\$3,550.00
RECEIVING REPORT <u>RETAIN A COPY FOR YOUR RECORDS</u>			TOTAL AMOUNT	\$3,550.00

Certification of Receipt of Goods / Services

I certify that the above items were received in good condition or that services were rendered in a satisfactory manner in accordance with specifications or proposal

SIGN HERE

K. Staub

DATE

5/30/07

RICHARD CHILDS

Certified Public Accountant

Certified Fraud Examiner

P.O. Box 2944, Westfield, NJ 07091

Phone (908) 789-2202 • Fax (908) 789-2252

May 29, 2007

County of Essex
County Counsel's Office
Martin Luther King Blvd.
Newark, New Jersey

Re: Essex County Adjuster's investigations-May 2007

FOR PROFESSIONAL SERVICES RENDERED

The following matters (See attached list), were investigated and submitted to the County Adjuster's office during the month of May 2007:

New admissions, 27 @ \$125 per file	\$3,375
Re-admissions, 4 @ \$45 per file	<u>180</u>
BALANCE DUE AND OWING	<u>\$3,550</u>

5/30/07
Rec'd
OK
to pay Nancy

VOUCHER FOR PARTIAL PAYMENT

PURCHASE ORDER NUMBER

DATE

1 7 0 3 3 1

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DEPARTMENT / DIVISION: County Counsel

Richard Childs, CPA, CFE, P.O. Box 2944, Westfield, NJ 07090

VENDOR NAME / ADDRESS: _____

Account Number

2 0 0 7 1 0 1 1 4 0 0 4 1 4 4 5 0 0

Payment #

Final

Partial

Project #

Vendor #

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1 4 4 2 2

QUANTITY	ITEM #	DESCRIPTION	UNIT PRICE	AMOUNT
		Professional Services - Re: Investigations of Individuals Admitted To The Essex County Hospital Center And Other State Institutions For The Mentally ILL - D/S April, 2007	\$2,520.00	\$2,520.00
RECEIVING REPORT RETAIN A COPY FOR YOUR RECORDS			TOTAL AMOUNT	\$2,520.00

Certification of Receipt of Goods / Services

I certify that the above items were received in good condition or that services were rendered in a satisfactory manner in accordance with specifications or proposal

SIGN HERE.....

[Signature]

DATE.....

4-27-07

RICHARD CHILDS

Certified Public Accountant

Certified Fraud Examiner

P.O. Box 2944, Westfield, NJ 07091
Phone (908) 789-2202 • Fax (908) 789-2252

April 27, 2007

Essex County Counsels Office
Hall of Records
Martin Luther King Blvd.
Newark, NJ

Re: Essex County Adjusters Investigations for the month of April 2007

FOR PROFESSIONAL SERVICES RENDERED

The attached schedule represents the investigations completed for the Essex County Adjuster during the month of April 2007.

18 New admission investigations @ \$125 per case	\$ 2,250
6 Re-admission investigation @ \$45 per case	<u>270</u>
Total due and owing	<u>\$ 2,520</u>

4/25/07
OK
Nancy

VOUCHER FOR PARTIAL PAYMENT

PURCHASE ORDER NUMBER

DATE

1 7 0 3 3 1

0 3 2 7 0 7

DEPARTMENT / DIVISION: County Counsel

VENDOR NAME / ADDRESS: Richard Childs, CPA, CFE, P.O. Box 2944, Westfield, NJ 07090

Account Number

2 0 0 7 1 0 1 1 4 0 0 4 1 4 4 5 0 0

Payment #

Final

Partial

Project #

Vendor #

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1 4 4 2 2

QUANTITY	ITEM #	DESCRIPTION	UNIT PRICE	AMOUNT
		Professional Services - Re: Investigations of Individuals Admitted To The Essex County Hospital Center And Other State Institutions For The Mentally ILL - D/S March, 2007	\$2,430.00	\$2,430.00

RECEIVING REPORT
RETAIN A COPY FOR YOUR RECORDS

TOTAL AMOUNT \$2,430.00

Certification of Receipt of Goods / Services

I certify that the above items were received in good condition or that services were rendered in a satisfactory manner in accordance with specifications or proposal

SIGN HERE

K. Staub

DATE

3/27/07

RICHARD CHILDS

Certified Public Accountant

Certified Fraud Examiner

P.O. Box 2944, Westfield, NJ 07091
Phone (908) 789-2202 • Fax (908) 789-2252

March 26, 2007

Essex County Counsel
Hall of Records, Room 530
Newark, NJ 07102

Re: County Adjuster Investigations, March 2007

FOR PROFESSIONAL SERVICES RENDERED:

Investigations performed for the month of March 2007 (see attached list)

18 investigations @ \$125 per case	\$2,250
4 re-admissions @ \$45 per case	<u>180</u>
Balance due and owing	<u>\$2,430</u>

3/26/07
OK to
pay Nancy

VOUCHER FOR PARTIAL PAYMENT

PURCHASE ORDER NUMBER

DATE

1 7 0 3 3 1

0 3 0 2 0 7

DEPARTMENT / DIVISION: County Counsel

VENDOR NAME / ADDRESS: Richard Childs, CPA, CFE, P.O. Box 2944, Westfield, NJ 07090

Account Number

2 0 0 7 1 0 1 1 4 0 0 4 1 4 4 5 0 0

Payment #

Final

Partial

Project #

Vendor #

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1 4 4 2 2

QUANTITY	ITEM #	DESCRIPTION	UNIT PRICE	AMOUNT
		Professional Services - Re: Investigations of Individuals Admitted To The Essex County Hospital Center And Other State Institutions For The Mentally ILL - D/S February, 2007	\$2,615.00	\$2,615.00
RECEIVING REPORT RETAIN A COPY FOR YOUR RECORDS			TOTAL AMOUNT	\$2,615.00

Certification of Receipt of Goods / Services

I certify that the above items were received in good condition or that services were rendered in a satisfactory manner in accordance with specifications or proposal.

SIGN HERE

K. Staub

DATE

3/5/07

RICHARD CHILDS

Certified Public Accountant

Certified Fraud Examiner

P.O. Box 2944, Westfield, NJ 07091
Phone (908) 789-2202 • Fax (908) 789-2252

February 28, 2007

County of Essex
County Counsel's Office
Martin Luther King Blvd.
Newark, New Jersey

Re: Essex County Adjuster's Investigations-February 2007

FOR PROFESSIONAL SERVICES RENDERED

(See attached list)

New admission investigations	18 @ \$125 per file	\$2,250
Re-admission investigations	3 @ 45 per file	<u>360</u>
TOTAL DUE AND OWING		<u>\$2,615</u>

*OK
Murray*

VOUCHER FOR PARTIAL PAYMENT

PURCHASE ORDER NUMBER

DATE

1 7 0 3 3 1

0 1 3 1 0 7

DEPARTMENT / DIVISION: County Counsel

VENDOR NAME / ADDRESS: Richard Childs, CPA, CFE, P.O. Box 2944, Westfield, NJ 07090

Account Number

2 0 0 7 1 0 1 1 4 0 0 4 1 4 4 5 0 0

Payment #

Final Partial

Project #

Vendor #

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1 4 4 2 2

QUANTITY	ITEM #	DESCRIPTION	UNIT PRICE	AMOUNT
		Professional Services - Re: Investigations of Individuals Admitted To The Essex County Hospital Center And Other State Institutions For The Mentally ILL - D/S January, 2007	\$11,530.00	\$11,530.00
RECEIVING REPORT <u>RETAIN A COPY FOR YOUR RECORDS</u>			TOTAL AMOUNT	\$11,530.00

Certification of Receipt of Goods / Services

I certify that the above items were received in good condition or that services were rendered in a satisfactory manner in accordance with specifications or proposal

SIGN HERE.....

K. Staut

DATE.....

2-1-07