

Marion County Sheriff's Office

Post Office Box 1987
Ocala, Florida 34478-1987

2/26/2024

RECEIPT # 52253

CASH RECEIPT

<u>Received From:</u>	<u>Payment Type</u>	<u>Reference #</u>	<u>Amount Received</u>
DARLING INGREDIENTS INC	Check	50991390	47.21

Description:

02/2024 OIL PICK UP FROM JAIL

003-0000-000 208000.000 DUE TO BOCC

47.21

Acct. Info. Redacted



DAR PRO Bakery Feeds

Darling Ingredients Inc.
5601 N MacArthur Blvd
Irving, TX 75038
904-964-8083

Remittance Advice			
Customer	Bill Through Date	Check Number	Page
480498 - MARION COUNTY JAIL	01/27/24	50991390	1 / 1

Cust. No.	Store No.	Customer	Quantity	UOM	Unit Price	Extended Amount
209046		MARION COUNTY JAIL 3290 NW 10TH ST OCALA, FL 34475				
		OUTDOOR GREASE	2,345.00	LB	0.02013	47.21
		SERVICE FEE COR	1.00	EA	0.00000	0.00
Site Total:						47.21

RECEIVED

FEB 21 2024

BY FISCAL

Darling Ingredients Inc.
5601 N MacArthur Blvd, Irving, TX 75038

DOCUMENT HAS A COLORED BACKGROUND. SECURITY FEATURES LISTED ON BACK.



DAR PRO Bakery Feeds

Darling Ingredients Inc.
5601 N MacArthur Blvd
Irving, TX 75038

Comerica Bank & Trust, N.A
Ann Arbor, MI

CHECK NUMBER
50991390

74-478
724

DATE 02/13/2024
VOID AFTER 180 DAYS

PAY Forty-Seven and 21/100 Dollars Only*****

AMOUNT	*****\$47.21
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DARLING INGREDIENTS INC.

[Signature]
AUTHORIZED SIGNATURE

AUTHORIZED SIGNATURE

TWO SIGNATURES REQUIRED FOR AMOUNTS OF \$75,000.00 OR GREATER

TO THE MARION COUNTY JAIL
ORDER PO BOX 1987
OF OCALA, FL 34478



Marion County Sheriff's Office

Post Office Box 1987
Ocala, Florida 34478-1987

3/05/2024

RECEIPT # 52317

CASH RECEIPT

<u>Received From:</u>	<u>Payment Type</u>	<u>Reference #</u>	<u>Amount Received</u>
FLORIDA SHERIFF'S RISK MANAGEMENT	Check	0131787	462.70

Description:

VEHICLE DAMAGE REIMBURSEMENT R HURST VEH# 36552 EV2024087928

003-0000-000 208000.000 DUE TO BOCC

462.70

Acct. Info. Redacted

FL Sheriffs Risk Mgmt Fund
To: Marion County S.O.

received
2.28.24

MAR1000

Check Number: 0000131787
Date: 02/22/2024

Claimant/Memo	Claim Number	Invoice No./Ref	Loss/Service Dates	Payment Code	Paid Amount
Marion EV2024087928 - B. Schaffer Unit # 36552	APHD20240093605				3010 - \$462.70

TOTALS: \$462.70

WARNING - THIS CHECK IS PROTECTED BY SPECIAL SECURITY FEATURES

FL Sheriffs Risk Mgmt Fund
2090 Summit Lake Drive
Tallahassee, FL 32317-7947

BB&T
Tallahassee, FL 32317-2090
63-9138/2631

0000131787

DATE
02/22/2024

PAY Four Hundred Sixty Two Dollars and 70 Cents

AMOUNT
\$462.70

TO THE
ORDER OF Marion County Sheriff's Office

P.O. Box 1987
Ocala, FL 34478

Acct. Info. Redacted

VOID AFTER 90 DAY:



SECURITY FEATURES INCLUDE MICROPRINTING - VOID PANTOGRAPH - ENDORSEMENT BACKER - BROWNSTAIN CHEMICAL REACTANT

⑈0000131787⑈

received
2-28-24



Memorandum

Date: February 22, 2024
To: Stacy Hall, Marion County SO
From: Brandy Schaffer *BS*
Re: Windshield Claim-Unit # 36552

The information contained in this communication is confidential and intended solely for the use of the addressee and may be subject to an attorney/client privilege and/or exempt from disclosure under the public records laws. Any unauthorized use, disclosure or copying is prohibited and may be unlawful. If you have received this communication in error, please contact the undersigned immediately.

Our Event #: EV2024087928

Check Amount: \$462.70

Please see the attached check.

2-1-24
Rolland Hurst #5620
Veh: 36552 2017 Ford F350
Dept. 3010

Need P.R.

Accurate Auto Glass LLC

7752

175 Marion Oaks Pass
Ocala, FL 34473
Florida Registration # MV-65212

352-245-4200
Fax: 352-307-4396

INVOICE DATE
2-15-24

S Name: Marion Oaks South
I Address: _____
L City & State: _____
T Zip Code: _____
O Phone no.'s: (H) _____

I Name: _____
S Address: _____
U City & State: _____
R Zip Code: _____
D Phone no.'s: (H) _____

AGENT	POLICY #	P.O. / CLAIM #	AUTHORIZED BY AGENT

VEHICLE INFORMATION					
YEAR	MAKE	MODEL	VEHICLE I.D. #	TAG #	DATE OF LOSS
2015	Ford	F350			
City	Inventory #	Description	List Price	Net Price	Amount
		Windshield Replace			460.00

LOCATION OF VEHICLE / COMMENTS

on 2-1-24 Driving south on I-75 had rock strike windshield causing it to crack from corner to corner

D 3010
W 66176
V 36552

2-15-24 900.00
570.00

Labor	
Sealants / Kit	
Moldings	
Other	
Misc. Materials & Supplies	
SUB TOTAL	
Sales Tax	
Sub Total Before Deductible	
Less Customer Deductible	

CONSISTANT WITH FLORIDA MOTOR VEHICLE REPAIR ACT, F.S. 559.901, 559.9221, I HEREBY ACKNOWLEDGE RECEIPT OF WRITTEN ESTIMATE

CASH CHECK CREDIT CARD

HAT / UNIT NO. _____ MILEAGE _____

INSTALLER'S NAME _____

Please Pay to **Accurate Auto Glass** → TOTAL

FULL SETTLEMENT OF ALL LOSS UNDER YOUR POLICY DESCRIBED ABOVE, AND UPON SUCH PAYMENT BEING MADE, ALL CLAIM (AND DEMAND) FOR LOSS AND DAMAGE DESCRIBED ABOVE SHALL BE THEREBY FOREVER DISCHARGED. IF FOR REASONS NOW UNKNOWN, MY POLICY DOES NOT COVER THIS CLAIM, I AGREE TO PAY THE FIRM LISTED ABOVE FOR THE REPAIRS

There will be a finance charge calculated at 1% per month on any outstanding balance carried from this invoice in excess of 30 days. In the event it becomes necessary for Accurate Auto Glass to institute any legal action for the collection of sums due under this invoice, then the purchaser agrees to pay all costs including all reasonable attorney fees incurred.

CUSTOMER SIGNATURE (X) _____ DATE INSTALLED _____