Costigan & Costigan, LLC 1222 Spruce Street Philadelphia, PA 19107

215-546-7215

Invoice submitted to:
Borough of Buena
616 Central Avenue
Minotola NJ 08341

October 01, 2021

Invoice #15288

Professional Services

		Hrs/Rate	Amount
9/9/2021	Review/analyze read complete AADARI OPRA FOR DISTRIBUTION	2.00 150.00/hr	300.00
	Review/analyze read new petition	1.00 150.00/hr	150.00
9/10/2021	Plan and prepare for read agenda and prepare for meeting	2.00 150.00/hr	300.00
9/13/2021	Appear for/attend attend meeting	1.00 150.00/hr	150.00
	Review/analyze read James OPRA for dalessandro for private and borough emails	1.00 150.00/hr	150.00
9/10/2021	Communicate (other external) discussion with clerk on opras outstanding and petitions and with zimmer on opras	1.50 150.00/hr	225.00
9/20/2021	Communicate (other external) call with braslow and calls with clerk	1.30 150.00/hr	195.00
9/17/2021	Communicate (other external) numerous calls with clerk	1.30 150.00/hr	195.00
9/22/2021	Communicate (other external) call on budget	0.50 150.00/hr	75.00
9/24/2021	Review/analyze review meeting agenda	1.00 150.00/hr	150.00
9/27/2021	Appear for/attend attend meeting	0.50 150.00/hr	75.00

		Hrs/Rate	Amount
9/27/2021	Review/analyze read agenda for meeting	0.50 150.00/hr	75.00
	Plan and prepare for prepare for meeting	1.00 150.00/hr	150.00
9/30/2021	Review/analyze read rowan 20 day notice letter from labor	2.00 150.00/hr	300.00
	For professional services rendered	**16.60**	**$2,490.00**
	Previous balance		**$18,315.00**
9/16/2021	Payment - thank you. Check No. 28617		($11,025.00)
	Total payments and adjustments		**($11,025.00)**
	Balance due		$9,780.00

STATE OF NEW JERSEY **PAYMENT VOUCHER** (VENDOR INVOICE)	DOCUMENT TC	AGY	NUMBER	BATCH TC	AGY	NUMBER	ACTG PER	FY

PO#	PV DATE	PP START MO	DY	YR	SCHED PAY MO	DY	YR	CHK CAT	OFF LIAB	F A	RF TY	CK FL	(A) VENDOR (PAYEE) ID NUMBER

CONTRACT NO.	AGENCY REF	BUYER	(B) TERMS	(C) TOTAL AMOUNT
				$2,490.00

(D) PAYEE NAME AND ADDRESS

Costigan and Costigan, LLC
117 Bellevue Avenue
Hammonton NJ 08037

(E) SEND COMPLETED FORM TO:

Cindi LoGiudio
Borough of Buena
616 Central Avenue
Minotola, NJ 08341

(F) PAYEE DECLARATIONS

I CERTIFY THAT THE WITHIN PAYMENT VOUCHER IS CORRECT IN ALL ITS PARTICULARS, THAT THE DESCRIBED GOODS OR SERVICES HAVE BEEN FURNISHED OR RENDERED AND THAT NO BONUS HAS BEEN GIVEN OR RECEIVED ON ACCOUNT OF SAID DOCUMENT.

→→ ______________________
PAYEE SIGNATURE

Member — PAYEE TITLE

10/1/21 — BILLING DATE

Line No.	REFERENCE CD	AGY	NUMBER	LINE	(G) PAYEE REFERENCE
1					
2					
3					

	FUND	AGCY	ORG CODE	SUB-ORG	APPR UNIT	ACTIVITY	OBJECT CD	SUB-OBJ	REV SRCE	SUB-	PROJ/JOB NO
1											
2											
3											

	RPT CT	BS ACT	DT	DESCRIPTION	QUANTITY	AMOUNT	ID	PF	TX
1									
2									
3									

ITEM NO.	DESCRIPTION OF ITEM	QUANTITY	UNIT	UNIT PRICE	AMOUNT
9/9/2021 thru Present	Legal Bill for Services Rendered	1	16.60	150.00	$2,490.00
				TOTAL	$2,490.00

CERTIFICATION BY RECEIVING AGENCY: I certify that the above articles have been received or services rendered as stated herein.

Signature

Title *Date*

CERTIFICATION BY APPROVAL OFFICER: I certify that this Payment Voucher is correct and just, and payment is approved.

Authorized Signature

Title *Date*