



ILLINOIS POLLUTION CONTROL BOARD

GOVERNOR

Pat Quinn



CHAIRMAN

Deanna Glosser



MEMBERS

Jennifer Burke

Jerome O'Leary

Carrie Zalewski



SPRINGFIELD OFFICE

1021 N. Grand Ave. East
P.O. Box 19274
Springfield, IL
62794-9274

Main: 217-524-8500
FAX: 217-524-8508



CHICAGO OFFICE

James R. Thompson Center
100 West Randolph
Suite 11-500
Chicago, IL
60601-3233

Main: 312-814-3620
FAX: 312-814-3669
TDD: 312-814-6032



WEB SITE

www.ipcb.state.il.us

May 21, 2014



ORIGINAL

TO: ALL PARTIES CONCERNED

RE: AC 2014- 37, IEPA v. Robert Manker (IEPA File No. 175-12-AC)

Pursuant to the May 15, 2014, Interim Opinion and Order adopted in the above-referenced matter, attached is an Affidavit of the Costs that were incurred by the Board as a result of a hearing on January 29, 2014.

Sincerely,



John T. Therriault
John T. Therriault, Clerk
Illinois Pollution Control Board

ILLINOIS POLLUTION CONTROL BOARD
May 21, 2014


IN THE MATTER OF:)
)
Illinois Environmental Protection Agency,)
)
Complainant,)
)
v.)
)
Robert Manker) AC 2013-007
) (Administrative Citation)
) (IEPA File No. 175-12-AC)
)
)
Respondent.)

AFFIDAVIT OF COSTS

I, John T. Therriault, Clerk of the Illinois Pollution Control Board (Board), state that the below-listed Administrative Citation costs, incurred by the Board as a result of hearing on January 29, 2014, in the above-captioned proceedings, are true and accurate:

Pollution Control Board Costs:

| | |
|------------------------------|------------------|
| Hearing Officer | \$ 0 |
| LA Court Reporters, LLC, | |
| Invoice # 18485 of 2/10/2014 | \$ 319.75 |
| Total | <u>\$ 319.75</u> |


John T. Therriault, Clerk
Illinois Pollution Control Board

Subscribed and sworn to before me this
21st Day of May, 2014


Notary Public



PROOF OF SERVICE

I, John T. Therriault, do state that I have this 21st Day of May, 2014, served the attached Affidavit of Costs upon the persons listed below, by placing same in envelopes addressed to said persons, first class mail, postage prepaid, and depositing same in a United States mailbox located at 100 West Randolph Street, Chicago, Illinois 60601.

Scott B. Sievers
IEPA
1021 North Grand Avenue East
P.O. Box 19276
Springfield, IL 62794-9276

Robert Manker
2287 West Street
Litterberry, IL 62650-6534



John T. Therriault
John T. Therriault, Clerk
Illinois Pollution Control Board

SUBSCRIBED AND SWORN TO BEFORE ME
THIS 21st Day of May, 2014.



Lynn Marie Delaney

Notary Public

INVOICE

L.A. COURT REPORTERS, LLC.
8 WEST MONROE STREET
SUITE 2007
CHICAGO, IL 60603
Phone:312-419-9292 Fax:312-419-9294

| | | |
|---|---------------------|----------------|
| Invoice No. | Invoice Date | Job No. |
| 18485 | 2/10/2014 | 16256 |
| Job Date | Case No. | |
| 1/29/2014 | AC 13-7 | |
| Case Name | | |
| ILLINOIS ENVIRONMENTAL PROTECTION AGENCY VS. ROBERT MANKER | | |
| Payment Terms | | |
| Net 15 | | |

RECEIVED
FEB 19 2014

STATE OF ILLINOIS
Pollution Control Board

DON BROWN
ILLINOIS POLLUTION CONTROL BOARD
100 WEST RANDOLPH
SUITE 11-500
CHICAGO, IL 60601

ORIGINAL TRANSCRIPT OF:
PUBLIC HEARING
Hourly

| | |
|-------------------------------|-----------------|
| 41.00 Pages | 194.75 |
| 2.50 Hours | 125.00 |
| TOTAL DUE >>> | \$319.75 |

THANK YOU FOR YOUR BUSINESS. PLEASE MAKE CHECK PAYABLE TO L.A. COURT REPORTERS, LLC. ALSO FOR YOUR CONVENIENCE, WE TAKE ALL MAJOR CREDIT CARDS.
NOTE: A 2.5% INTEREST CHARGE WILL BE APPLIED PER MONTH PAST DUE.

*Received
2/10/14
Dob*

Tax ID: 27-0986977

Phone: 312-814-3461 Fax:312-814-3669

Please detach bottom portion and return with payment.

DON BROWN
ILLINOIS POLLUTION CONTROL BOARD
100 WEST RANDOLPH
SUITE 11-500
CHICAGO, IL 60601

Invoice No. : 18485
Invoice Date : 2/10/2014
Total Due : \$ 319.75

Remit To: **L.A. COURT REPORTERS, LLC.**
8 WEST MONROE STREET
SUITE 2007
CHICAGO, IL 60603

Job No. : 16256
BU ID : 1-NEW
Case No. : AC 13-7
Case Name : ILLINOIS ENVIRONMENTAL PROTECTION
AGENCY VS. ROBERT MANKER

INVOICE VOUCHER

FY14

ENVIRONMENTAL PROTECTION AGENCY

*

| | | |
|--|--|--|
| PAYMENT OF INTEREST MAY BE AVAILABLE IF THE STATE FAILS TO COMPLY WITH THE STATE PROMPT PAYMENTS ACT, 30 ILCS 540 DISPOSITION OF COPIES 1.Comptroller 2.Agency 3.Agency 4.Remittance Copy 5.Agency 6.Agency 7.Retained By Vendor | 2. Taxpayer Identification Number <p style="text-align: center;">270986977</p> 3. Vendor or Payee LA COURT REPORTERS LLC 8 WEST MONROE SUITE 2007 CHICAGO IL 606032453 | 4. Voucher No. <u>6669</u> 5. Voucher Date <u>02-27-14</u> 6. Appropriation Account Code <u>207-53270-1900-01-5!</u> 7. Invoice Number <u>18485</u> 8. Invoice Date <u>02-10-14</u> |
|--|--|--|

| 10. Indicate Beginning and Ending Date of Service and GAAP Code. Give Complete Description of Articles/Services Rendered or Attach Itemized Vendor Invoice. | 11.Quantity | 12.Units | 13.Unit Price | 14.Amount |
|--|-------------|----------|---------------|-----------|
| CONTROL # /VENDOR INVOICE #/INV DATE /DOC 0000007519/18485 /02-10-2014/1266 LA REPORTING 02102014 02102014 5700 IL POLLUTION CONTROL BOARD COURT REPORTING SERVICES FOR CASE AC 13-7 ON 01/29/14 NOT SUBJECT TO CONTRACTUAL WITHHOLDINGS | | | | \$319.75 |

| | | | | | | |
|---------------|-----------------|-------------|--------------------------|--------------------|------------------------|----------|
| 18. Exp. Obj. | 19. Exp. Amount | 20.CFDA No. | 22. Obligation No. | 23. Payment Amount | 15. Subtotal | |
| 1266 | \$319.75 | | PCB12001 | \$319.75 | | \$319.75 |
| | | | | | 16. Discount/Deduction | |
| | | | | | 17. Total Amount | |
| 21.Total Exp. | \$319.75 | | 24. Total Payment Amount | \$319.75 | | \$319.75 |

25.For Agency Use Only

REF DOC:
 SUBA: 70100
 SUB SUBA:
 BLANKET OBL#:

Approved for Payment

| | | |
|-------------------|------|-------|
| Receiving Officer | Date | Clerk |
|-------------------|------|-------|

Certification of Receiving Agency

I certify that the goods or services specified on this voucher were for the use of this agency and that the expenditure for such goods or services was authorized and lawfully incurred, that such goods or services meet all the required standards set forth in the purchase agreement or contract to which this voucher relates; and that the amount shown on this voucher is correct and approved for payment. If applicable, the reporting requirements of Section 5.1 of the Governor's Office of Management and Budget Act have been met.

Agency Head (Signature)

Head of Unit or Authorized Agent _____ Date _____ (Date)