

30-9
1140

When countersigned by the Treasurer
payable at:
Frost Bank
New Braunfels, TX

020965

NO.

Warrant Check

\$108.30

\$ 30/100

ONE HUNDRED EIGHT & 30/100

being the amount allowed by the Commission's Court out of the above named Fund

June 21ST 2007

Witness my hand and seal of said Court at New Braunfels, Texas this 21ST day of June 2007

County Auditor

County Treasurer

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

PO BOX 13089
AUSTIN, TX 78711-3089

Void if not presented for payment within 90 days
not valid until countersigned by County Treasurer

THIS DOCUMENT CONTAINS A VOID PANTOGRAPH, MICROPRINTING, IN THIS WARNING BORDER AND AN ARTIFICIAL WATERMARK - HOLD AT AN ANGLE TO VIEW.

⑈020965⑈ ⑆114000093⑆

39000715

THE COUNTY OF COMAL
New Braunfels, Texas

NON-NEGOTIABLE

Please detach and keep this statement

Check # 20965-00

020965

DATE OF INVOICE	INVOICE NO.	DESCRIPTION	AMOUNT
06/13/07	6/13/07	COPIES OF WATER POLLUTION ABATEMENT PLANS FOR	\$ 86.20
06/15/07	6/15/07	COPIES OF TCEQ APPROVED SEPTIC PERMITS FOR COM	22.10
Amount Due			\$ 108.30

This Warrant check is in payment of the account detailed in the above statement and when detached and paid becomes a receipt in full.

2007 JUN 22 AM 10:29

RECEIVED 1050
SAN ANTONIO
REGION

**Texas Commission on Environmental Quality (TCEQ)
CUSTOMER SERVICES REQUEST**

Receipt # _____

Date: _____

CUSTOMER INFORMATION

Company/Organization _____

Attn: Name Brenda Ritzen # 057722

Address _____ Area Code () Phone No. ()

City _____ State _____ Zip _____ Area Code () Fax No. ()

Call with estimate Call when ready Customer Pick up Send by Mail

Fed. Exp. # _____ Airborne # _____

Request reproduction of the following: (Include any specifics such as record series, file name, computer model identification no., well no., etc.)
Copy all PAP Approval letters for Comal Co.

Special Instructions:
 See attached list Clipped to pages Entire file Oversize maps Certify Front only Front & back

PROCESSING INFORMATION

Request taken by: _____ Request filled by: Elene

STATEMENT OF CHARGES

SERVICES	FEES	QUANTITY	COST
Hard Copies of Regular Size Documents: Copy Center or Self Service	\$ 0.10 each	862	86.20
Hard Copies of Documents on Microfiche Film	\$ 0.10 each		
Hard Copies of Oversize Documents	\$ 0.75 per sq. ft.		
Copies of Audio Cassette Tapes	\$ 8.00 each		
Copies of Compact Disks	\$ 9.00 each		
Certifications	\$ 0.50 each		
Other			
Labor Charges	\$ 15.00 per hour		
Postage Charge			
TOTAL			<u>86.20</u>

FOR OFFICIAL USE ONLY:

6/13/07 Date notified of charges

_____ Date Shipped

Building _____ Mail Code _____

_____ Print employee name

PAYMENT INFORMATION:

YOUR ORDER WILL NOT BE RELEASED UNTIL PAYMENT IN FULL IS RECEIVED. A FIFTY PERCENT DEPOSIT MAYBE REQUIRED ON ORDERS WITH AN ESTIMATED COST WHICH EXCEEDS \$500.00. Checks should be made payable to the TCEQ. Payment should be made by mail to TCEQ, P.O. Box 13088, Austin, TX 78711-3088 or, in person to the Cashier's Office of the Financial Administration Division located on the third floor of the TCEQ Administration Building (A). For overnight payment, send to TCEQ, 12100 Park 35 Circle, Austin, TX 78753, Attn: Cashier. Upon receipt of payment, the requested material will be mailed unless prior arrangements have been made to pick it up at our office. Please return this order form with your payment.

Original - Copy Center

Yellow - Customer Copy

Pink Financial - Administration

**Texas Commission on Environmental Quality (TCEQ)
CUSTOMER SERVICES REQUEST**

Receipt # _____

Date: _____

CUSTOMER INFORMATION

Company/Organization <i>Comal County</i>				
Attn: Name <i>Brend Ritzen</i>				
Address			Area Code ()	Phone No.
City	State	Zip	Area Code ()	Fax No.
<input type="checkbox"/> Call with estimate		<input type="checkbox"/> Call when ready		<input type="checkbox"/> Customer Pick up
<input type="checkbox"/> Fed. Exp. # _____		<input type="checkbox"/> Airborne # _____		
Request reproduction of the following: (Include any specifics such as record series, file name, computer model identification no., well no., etc.)				
Special Instructions:				
<input type="checkbox"/> See attached list		<input type="checkbox"/> Clipped to pages		<input type="checkbox"/> Entire file
		<input type="checkbox"/> Oversize maps		<input type="checkbox"/> Certify
		<input type="checkbox"/> Front only		<input type="checkbox"/> Front & back

PROCESSING INFORMATION

Request taken by:	<i>E Lopez</i>	Request filled by:	<i>E Lopez</i>
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STATEMENT OF CHARGES

SERVICES	FEES	QUANTITY	COST
Hard Copies of Regular Size Documents: Copy Center or Self Service	\$ 0.10 each	<i>221</i>	<i>22.10</i>
Hard Copies of Documents on Microfiche Film	\$ 0.10 each		
Hard Copies of Oversize Documents	\$ 0.75 per sq. ft.		
Copies of Audio Cassette Tapes	\$ 8.00 each		
Copies of Compact Disks	\$ 9.00 each		
Certifications	\$ 0.50 each		
Other			
Labor Charges	\$ 15.00 per hour		
Postage Charge			
TOTAL			<i>22.10</i>

FOR OFFICIAL USE ONLY:

_____	Date notified of charges
_____	Date Shipped
Building _____	Mail Code _____

Print employee name	

PAYMENT INFORMATION:

YOUR ORDER WILL NOT BE RELEASED UNTIL PAYMENT IN FULL IS RECEIVED. A FIFTY PERCENT DEPOSIT MAYBE REQUIRED ON ORDERS WITH AN ESTIMATED COST WHICH EXCEEDS \$500.00. Checks should be made payable to the TCEQ. Payment should be made by mail to TCEQ, P.O. Box 13088, Austin, TX 78711-3088 or, in person to the Cashier's Office of the Financial Administration Division located on the third floor of the TCEQ Administration Building (A). For overnight payment, send to TCEQ, 12100 Park 35 Circle, Austin, TX 78753, Attn: Cashier. Upon receipt of payment, the requested material will be mailed unless prior arrangements have been made to pick it up at our office. Please return this order form with your payment.

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