

UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE		PROOF OF CLAIM		 <small>s138129</small> Scheduled Claim Ref # 2 F2-25755 YOUR CLAIM IS SCHEDULED AS \$4 581 14 UNSECURED	
In re Fleming Companies, Inc		Case Number 03-10945			
NOTE This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.				<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input type="checkbox"/> Check box if this address differs from the address on the envelope sent to you by the court.	
Name of Creditor and Address <div style="text-align: right; margin-right: 100px;">0354429440990</div> WIL-KIL ERON PEST CONTROL PO BOX 13526 MILWAUKEE WI 53213				The amounts reflected above constitute your claim as scheduled by the Debtor. If you agree with the amounts set forth herein and have no other claim against the Debtor, you do not need to file this proof of claim EXCEPT as stated below. If the amounts shown above are listed as Contingent Unliquidated or Disputed, a proof of claim must be filed. If you have already filed a proof of claim with the Bankruptcy Court or BMC, you do not need to file again.	
Creditor Telephone Number <u>627 783-6261</u>				CREDITOR TAX ID # <u>39-1316569</u>	
ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR		Check here <input type="checkbox"/> replaces or amends a previously filed claim dated _____.			
1 BASIS FOR CLAIM <input checked="" type="checkbox"/> Goods sold <input type="checkbox"/> Personal injury/wrongful death <input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input checked="" type="checkbox"/> Services performed <input type="checkbox"/> Taxes <input type="checkbox"/> Wages, salaries, and compensation (Fill out below) <input type="checkbox"/> Money loaned <input type="checkbox"/> Other (describe briefly) _____ Your social security number _____ Unpaid compensation for services performed from _____ to _____ <div style="text-align: right;">(date) (date)</div>					
2 DATE DEBT WAS INCURRED <u>5/01 - 3/03</u>		3 IF COURT JUDGMENT, DATE OBTAINED			
4 TOTAL AMOUNT OF CLAIM AS OF PETITION DATE \$ _____ (unsecured) \$ _____ (secured) \$ <u>9,206 00</u> (unsecured priority) \$ <u>9,206 00</u> (total)					
If all or part of your claim is secured or entitled to priority, also complete item 5 or 6 below. <input type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.					
5 SECURED CLAIM <input type="checkbox"/> Check this box if your claim is secured by collateral (including a right of setoff). Brief description of collateral: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other _____ Value of collateral \$ _____ Amount of arrearage and other charges at time case filed included in secured claim above, if any \$ _____			6 UNSECURED PRIORITY CLAIM <input type="checkbox"/> Check this box if you have an unsecured priority claim. Specify the priority of the claim: <input type="checkbox"/> Wages, salaries, or commissions (up to \$4,650) earned within 90 days before filing of the bankruptcy petition or cessation of the Debtor's business, whichever is earlier. 11 U.S.C. § 507(a)(3) <input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(4) <input type="checkbox"/> Up to \$2,100 of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(6) <input type="checkbox"/> Alimony, maintenance, or support owed to a spouse, former spouse, or child. 11 U.S.C. § 507(a)(7) <input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8) <input type="checkbox"/> Other. Specify applicable paragraph of 11 U.S.C. § 507(a) _____. <small>Amounts are subject to adjustment on 4/1/01 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.</small>		
7 CREDITS The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.					
8 SUPPORTING DOCUMENTS Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS if the documents are not available. Explain. If the documents are voluminous, attach a summary.					
9 DATE-STAMPED COPY To receive an acknowledgment of your claim, please enclose a self-addressed stamped envelope and an additional copy of this proof of claim.					
The original of this completed proof of claim form must be sent by mail or hand delivered (FAXES NOT ACCEPTED) so that it is received on or before 4:00 p.m., September 15, 2003, Pacific Daylight Time. <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> BY MAIL TO Bankruptcy Management Corporation P.O. BOX 900 El Segundo, CA 90245-0900 </div> <div style="width: 45%;"> BY HAND OR OVERNIGHT DELIVERY TO Bankruptcy Management Corporation 1330 East Franklin Avenue El Segundo, CA 90245 </div> </div>				THIS SPACE FOR COURT USE ONLY <div style="font-size: 2em; font-weight: bold; margin: 10px 0;">FILED</div> <div style="font-size: 1.5em; font-weight: bold; margin: 5px 0;">SEP 17 2003</div> <div style="font-size: 2em; font-weight: bold; margin: 10px 0;">BMC</div> <div style="font-size: 0.8em; margin-top: 5px;">Fleming Companies Claim</div>	
DATE SIGNED <u>9/15/03</u>		SIGN and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any). <u>C. J. Fields CATHLEEN FIELDS ACTING MANAGER</u>			
Penalty for presenting fraudulent claim is a fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 AND 3571.					

See Other Side For Instructions

14071

372.00+
 265.00+
 372.00+
 66.00+
 272 00-
 265.00+
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 372 00-
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 50 00+
 50.00+
 90 00+
 90 00+
 90.00+
 112.00+
 112 00+

Bill-Bill Pest Solutions Partner
800-225-6735 www.bill-bill.com
STATEWIDE

72 Since 1929

1 1/2% PER MONTH (18% PER ANNUM), WILL BE CHARGED ON ALL INVOICES PAST DUE.

SERVICE LOCATION

FLYING CO.
1200 W. SUNSET DR.
WALKER, WI 53186

CONTACT DARYL DRAGER PHONE# 262-542-9311 PO#
1ST MONDAY-- DO ALL EXT BST ALL INTERIOR TRAPS, LOG BOOK & MSDS
SHEETS ARE IN DARYL'S OFFICE, EXTERIOR AND INTERIOR RODENT CONTROL
STRUCTURAL SANITATION AND PEST MONITORING & INTERIOR CRAWLING INSECT
CONTROL JULY TREATMENT

1007	402	0059	Exterior	BST	10/1	10/1

#80 -	COMMON OR BRAND NAME	MANUFACTURER	EPA REG #	PRECAUTION CODE(S)
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SEE REVERSE SIDE FOR MATERIAL LIST CODE #'S & PRECAUTIONS

A ☐ COCKROACH E ☐ FLYING INSECTS I ☐ SANITATION M ☐ STRUCTURE
B ☐ STORED PRODUCT INSECTS F ☐ RODENTS J ☐ HARBORAGES N ☐ EXTERNAL ENVIRONMENT
C ☐ ANTS G ☐ BIRDS K ☐ VEGETATION O ☐ STORAGE
D ☐ WOOD DESTROYING INSECTS H ☐ MISC INSECTS L ☐ INACCESSIBLE AREAS P ☐ OTHER

Inspected interior/exterior student equipment

-No activity interior at this time

- Feeding of bat's 10.53 & 54

Test: - ball replaced

401A

SEE ADDENDUM ☐

TECHNICIAN SIGNATURE	147	5-7-01	9:15am	3:45pm	X	CLIENT SIGNATURE
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*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

PINK CLIENT INVO

INVOICE / I.P.M. LOG REPORT



**WIL-KIL
PEST CONTROL**

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STATEWIDE

CLIENT

Celebrating
72 Years
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REMIT TO

WIL-KIL PEST CONTROL
PO BOX 13526
MILWAUKEE, WI 53213-0526

TERMS NET 30 DAYS

1 1/2% PER MONTH (18% PER ANNUM)
BE CHARGED ON ALL INVOICES PAST D

SERVICE LOCATION

Hemming Co
1200 W Sunset Dr
Waukesha, WI 5318

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
54368		701778	Commercial Weekly <i>Seasonal</i>	136	\$265 ⁰⁰		\$265 ⁰⁰

CONTACT *Darryl*

PHONE #

PO #

5th Monday service

SERVICE & MATERIAL APPLICATION RECORD

CODE	APPLIED	DATE	LOCATION	APPLICATOR	PRODUCT	CONC	REMARKS
							<i>None needed today</i>

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A <input type="checkbox"/> COCKROACH	E <input type="checkbox"/> FLYING INSECTS	I <input type="checkbox"/> SANITATION	M <input type="checkbox"/> STRUCTURE
B <input type="checkbox"/> STORED PRODUCT INSECTS	F <input type="checkbox"/> RODENTS	J <input type="checkbox"/> HARBORAGES	N <input type="checkbox"/> EXTERNAL ENVIRONMENT
C <input type="checkbox"/> ANTS	G <input type="checkbox"/> BIRDS	K <input type="checkbox"/> VEGETATION	O <input type="checkbox"/> STORAGE
D <input type="checkbox"/> WOOD DESTROYING INSECTS	H <input type="checkbox"/> MISC INSECTS	L <input type="checkbox"/> INACCESSIBLE AREAS	P <input type="checkbox"/> OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

*Checked interior radiant equipment.
- No activity at this time.*

Potato Chips - too close to wall.

SEE ADDENDUM ☐

TECHNICIAN SIGNATURE

TECH#

DATE

IN

OUT

CLIENT SIGNATURE

LICENSE # 95- *061828*

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

PINK CLIENT INVOICE

6665
438 8420
782 7811
359-0466



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STATEWIDE

CLIENT

FLEMING CO.
1200 W SUNSET DR
WAUKESHA, WI 53186

Celebrating
72
Years
Since 1929

WIL-KIL PEST CONTROL
PO BOX 13526
MILWAUKEE WI 53213-0526

TERMS NET 30 DAYS
1 1/2% PER MONTH (18% PER ANNUM) WILL
BE CHARGED ON ALL INVOICES PAST DUE

SERVICE LOCATION

FLEMING CO.
1200 W SUNSET DR.
WAUKESHA, WI 53186

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
95095	08/19/01	107781	COMMERCIAL MONTHLY	136	372.00	0.00	372.00

CONTACT: DARYLS DRAPER 163189 PHONE # 262-542-9011 PO #
1ST MONDAY - DO ALL EXT BST. ALL INTERIOR TRAPS, LOG BOOK & MSDS
ACT 128
SHEETS ARE IN DARYLS OFFICE, EXTERIOR AND INTERIOR RODENT CONTROL,
STRUCTURAL SANITATION AND PEST MONITORING & INTERIOR CRAWLING INSECT

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL *CODE#	AMOUNT USED	CONCEN- TRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
7007	52.02	.005%		Exterior	BST	N/A	Rodent

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80.

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH	E ___ FLYING INSECTS	I ___ SANITATION	M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS	F ___ RODENTS	J ___ HARBORAGES	N ___ EXTERNAL ENVIRONMENT
C ___ ANTS	G ___ BIRDS	K ___ VEGETATION	O ___ STORAGE
D ___ WOOD DESTROYING INSECTS	H ___ MISC INSECTS	L ___ INACCESSIBLE AREAS	P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

Inspected & reset interior traps
→ No activity at this time

Something should be done about the damaged goods along
south wall just east of east vent system.

Inspected exterior rodent equipment

→ replaced & cleaned due to food on 20, 24, 25, 26, 54, 56, 57, 71

→ replaced due to weathering 1, 2, 4, 5, 8, 27-29, 31, 33, 40, 41, 44, 48-51, 52, 62, 63, 70 & 72

→ bait stations replaced 3, 20, 42, 48, 57

SEE ADDENDUM ☐

TECHNICIAN SIGNATURE <i>Richard J. Blevins</i>	TECH# 147	DATE 3-6-01	IN 8:30am	OUT 1:45pm	CLIENT SIGNATURE <i>[Signature]</i>
LICENSE # 95-361228	*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT				
WHITE LOCATION COPY	BLUE BRANCH	YELLOW CORP	GREEN PAYMENT COPY	PINK CLIENT INVOICE	

2220 Melby St Eau Claire WI 54703
(715) 835 8203

Amount Due

INVOICE PEST LOG REPORT



Celebrating
72
Years
Since 1929

REMIT TO
WIL-KIL PEST CONTROL
PO BOX 1352c
MILWAUKEE WI 532 5 052
TERMS NET 30 DAYS
1/20 PER MONTH (18% PER ANNU)
BE CHARGED ON ALL INVOICES P&C
SERVICE LOCATION

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
95093							

CONTACT _____ PHONE # _____ PO # \$272.00

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL *CODE#	AMOUNT USED	CONCENTRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structures Sites Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX AREA OR VOLUME TREATED	TARGET PESTS (OR PESTS)

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80 _____
COMMON OR BRAND NAME _____ MANUFACTURER _____ EPA REG # _____ PRECAUTION CODE(S) _____

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH E ___ FLYING INSECTS I ___ SANITATION M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS F ___ RODENTS J ___ HARBORAGES N ___ EXTERNAL ENVIRONMENT
C ___ ANTS G ___ BIRDS K ___ VEGETATION O ___ STORAGE
D ___ WOOD DESTROYING INSECTS H ___ MISC INSECTS L ___ INACCESSIBLE AREAS P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

SEE ADDENDUM ☐

TECHNICIAN SIGNATURE [Signature] TECH# 107 DATE 8-1-00 IN 10 OUT 10 **X** CLIENT SIGNATURE [Signature]

LICENSE # 95- CV 1222

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT



Celebrating
72
Years
Since 1929

WIL-KIL PEST CONTROL
PO BOX 13526
MILWAUKEE WI 53213-0526

TERMS NET 30 DAYS
1 1/2% PER MONTH (18% PER ANNUM) W/IN
BE CHARGED ON ALL INVOICES PAST DUE

SERVICE LOCATION

Fleming Co
1200 W. Sunset Dr
Waukesha, WI 53189

Same

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
111018		101778	5th Week / no	136			265

CONTACT

PHONE #

PO #

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE	AMOUNT USED	CONCENTRATION	LOCATIONS OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
7007	10.00	0052	Exterior	BST	N/A	Mice

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

- | | | | |
|-------------------------------|----------------------|--------------------------|----------------------------|
| A ___ COCKROACH | E ___ FLYING INSECTS | I ___ SANITATION | M ___ STRUCTURE |
| B ___ STORED PRODUCT INSECTS | F ___ RODENTS | J ___ HARBORAGES | N ___ EXTERNAL ENVIRONMENT |
| C ___ ANTS | G ___ BIRDS | K ___ VEGETATION | O ___ STORAGE |
| D ___ WOOD DESTROYING INSECTS | H ___ MISC INSECTS | L ___ INACCESSIBLE AREAS | P ___ OTHER |

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

Inspected & cleaned interior rodent equipment.
→ Mouse removed from trap #134A

Exterior bait's replaced due to decreased tamper resistance at 54, 67, 69, & 71

Thank You!

SEE ADDENDUM ☐

<i>Albert B. Blad</i>	147	10-29-01	6:45	1:50pm	<i>X James Coaklin</i>
TECHNICIAN SIGNATURE	TECH#	DATE	IN	OUT	CLIENT SIGNATURE
LICENSE # 95-061228	*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT				
WHITE LOCATION COPY	BLUE BRANCH	YELLOW CORP	GREEN PAYMENT COPY	PINK CLIENT INVOICE	

WHITE LOCATION COPY

BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

INSURE PROPER CREDIT

APPLETON (820) 731 2640
 • EAU CLAIRE (715) 835-8203
 • MADISON (608) 249-8665
 • MILWAUKEE (414) 438-8421
 • LA CROSSE (608) 782-7811
 • SCHOFIELD (715) 358-0465



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 STATEWIDE

INVOICE / I.P.M. LOG REPORT

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72
Years
 Since 1929

REMIT TO

WIL-KIL PEST CONTROL
 PO BOX 13526
 MILWAUKEE WI 53213-0526

TERMS NET 30 DAYS

1 1/2% PER MONTH (18% PER ANNUM)
 BE CHARGED ON ALL INVOICES PAST DUE

CLIENT

FLEMING CO
 1200 W SUNSET DR
 WAUKESHA, WI 53186

SERVICE LOCATION

FLEMING CO
 1200 W SUNSET DR
 WAUKESHA, WI 53186

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
151450	12/02/01	101778	COMMERCIAL MONTHLY	136	372 00	0 00	372 0

CONTACT: DARYLS DRAGER PHONE # 262-542-9311 PO #
 1ST MONDAY - DO ALL EXT BST ALL INTERIOR TRAPS, LOG BOOK & MSDS
 ACT 128
 SHEETS ARE IN DARYLS OFFICE, EXTERIOR AND INTERIOR RODENT CONTROL,
 STRUCTURAL SANITATION AND PEST MONITORING & INTERIOR CRAWLING INSECT

SERVICE & MATERIAL APPLICATION RECORD

CODE	AMOUNT USED	CONCENTRATION	LOCATION	STRUCTURES, SITES, OR AREAS TREATED	TECHNIQUE / APPLICATION	WIND DIRECTION / WIND SPEED	WIND DIRECTION / WIND SPEED	TARGET PESTS (ON PESTS)
7067	38oz	.005%		Exterior	BST	N/A		Misc

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

*SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH E ___ FLYING INSECTS I ___ SANITATION M ___ STRUCTURE
 B ___ STORED PRODUCT INSECTS F ___ RODENTS J ___ HARBORAGES N ___ EXTERNAL ENVIRONMENT
 C ___ ANTS G ___ BIRDS K ___ VEGETATION O ___ STORAGE
 D ___ WOOD DESTROYING INSECTS H ___ MISC INSECTS L ___ INACCESSIBLE AREAS P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

Inspected rodent equipment.
 → No interior activity
 → Exterior feeding at Bst #s 12, 13, 15, 16, 17, 25, 28, 33-36,
 45, 46, 52, 61, 74 & 76: Bait replaced
 Replaced Bait at - bst # 27, 49, 62 due to weathering etc.

SEE ADDENDUM ☐

TECHNICIAN SIGNATURE: *[Signature]* TECH#: 147 DATE: 12-3-01 IN: 2:10pm OUT: 5:00pm X
 LICENSE # 95- 261228 CLIENT SIGNATURE: *[Signature]*

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

PINK CLIENT INVOICE

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CLIENT

FLEMING CO
1200 W SUNSET DR.
WAUKESHA, WI 53186Celebrating
72 Years
Since 1929PO BOX 13526
MILWAUKEE WI 53213-0526**TERMS NET 30 DAYS**
1 1/2% PER MONTH (18% PER ANNUM) WILL
BE CHARGED ON ALL INVOICES PAST DUE

SERVICE LOCATION

FLEMING CO
1200 W SUNSET DR.
WAUKESHA, WI 53186

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
151448	12/02/01	101778	COMMERCIAL MONTHLY	136	272.00	0.00	272.00

CONTACT **DARYLS DRAGER** PHONE # **262-542-9311** PO #
1ST MONDAY --DO ALL EXT BST ALL INTERIOR TRAPS, LOG BOOK & MSDS
ACT 128
SHEETS ARE IN DARYLS OFFICE, EXTERIOR AND INTERIOR RODENT CONTROL,
STRUCTURAL SANITATION AND PEST MONITORING & INTERIOR CRAWLING INSECT**SERVICE & MATERIAL APPLICATION RECORD**

DATE	USE	CLIENT	LOCATION/TYPE OF APPLICATIONS (Structure, Room Or Area Treated)	TECHNIQUE OF APPLICATION	APPROX AREA OR VOLUME TREATED	TARGET PEST (OR BEST)
			None needed			

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80: COMMON OR BRAND NAME MANUFACTURER EPA REG. # PRECAUTION CODE(S)

SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS*INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS**A ___ COCKROACH- E ___ FLYING INSECTS I ___ SANITATION M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS F ___ RODENTS J ___ HARBORAGES N ___ EXTERNAL ENVIRONMENT
C ___ ANTS G ___ BIRDS K ___ VEGETATION O ___ STORAGE
D ___ WOOD DESTROYING INSECTS H ___ MISC INSECTS L ___ INACCESSIBLE AREAS P ___ OTHER**SERVICE REPORT SUMMARY (Detailed Explanations & Comments)**Inspected interior rodent equipment
→ No activity today

Wall void on west side to be sealed

*Frank Yoni*SEE ADDENDUM ☐

<i>Alvin B. Blum</i>	147	12-10-01	10:00	12:30	X	<i>John Caplin</i>
TECHNICIAN SIGNATURE	TECH#	DATE	IN	OUT		CLIENT SIGNATURE
LICENSE # 95-061228	*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT					
WHITE LOCATION COPY	BLUE BRANCH	YELLOW CORP	GREEN PAYMENT COPY	PINK CLIENT INVOICE		

YELLOW CORP

GREEN: PAYMENT COPY

PINK INVOICE

APPLETON (920) 731 2640
LA CLARE (715) 835 8203
MADISON (608) 249 6665
MILWAUKEE (414) 438 8420
A CROSBIE (908) 782 7811
CHOFIELD (715) 359 0466



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CLIENT

FLEMING CO
1200 W SUNSET DR
WAUKESHA, WI 53186

INVOICE / I.P.M. LOG REPORT

Celebrating
72
Years
Since 1929

REMIT TO

WIL-KIL PEST CONTROL
PO BOX 13526
MILWAUKEE, WI 53213-0526

TERMS NET 30 DAYS
1 1/2% PER MONTH (18% PER ANNUM) WILL
BE CHARGED ON ALL INVOICES PAST DUE

SERVICE LOCATION

FLEMING CO.
1200 W SUNSET DR
WAUKESHA, WI 53186

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
151451	12/16/01	101778	COMMERCIAL MONTHLY	136	372.00	0 00	372.00

CONTACT: **DARYLS DRAGER** PHONE # **262-542-9311** PO #
1ST MONDAY - DO ALL EXT BST. ALL INTERIOR TRAPS, LOG BOOK & MSDS
ACT 128
SHEETS ARE IN DARYLS OFFICE, EXTERIOR AND INTERIOR RODENT CONTROL,
STRUCTURAL SANITATION AND PEST MONITORING & INTERIOR CRAWLING INSECT

SERVICE & MATERIAL APPLICATION RECORD

DATE	CONC.	LOC.	TECH.	APPRX. SHEET OR VOLUME TREATED	INSECT
1007	2102	0052	Exterior	BST	MAA
					micc

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80
COMMON OR BRAND NAME
MANUFACTURER
EPA REG #
PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH
B ___ STORED PRODUCT INSECTS
C ___ ANTS
D ___ WOOD DESTROYING INSECTS
E ___ FLYING INSECTS
F ___ RODENTS
G ___ BIRDS
H ___ MISC INSECTS
I ___ SANITATION
J ___ HARBORAGES
K ___ VEGETATION
L ___ INACCESSIBLE AREAS
M ___ STRUCTURE
N ___ EXTERNAL ENVIRONMENT
O ___ STORAGE
P ___ OTHER

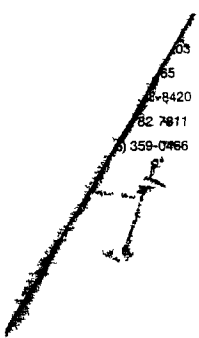
SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

Inspected rodent camp
→ Interior: mouse removed from trap #106.
gap needs to be sealed.
→ Exterior: Feeding at bait #1's 6, 24, 26, 28, 43, 45-46 & 76. Bait replaced
Bait replaced due to weathering at bait #1's 41-42 & 69.

SEE ADDENDUM ☐

TECHNICIAN SIGNATURE **147** **12-17-01** **1-30pm** **5:00pm** **X**
TECH# DATE IN OUT CLIENT SIGNATURE

LICENSE # 95-06218
WHITE LOCATION COPY BLUE BRANCH YELLOW CORP GREEN PAYMENT COPY PINK CLIENT INVOICE
*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT



WIL-KIL PEST CONTROL

A **Copesan** Pest Solutions Partner
800-236-8735 • www.wil.kil.com
STATEWIDE

CLIENT

FLEMING CO
1200 W SUNSET DR
WAUKESHA, WI 53186

INVOICE / TERM LOG REPORT

Celebrating
72
Years
Since 1929

REMIT TO

WIL-KIL PEST CONTROL
PO BOX 13526
MILWAUKEE, WI 53213-0526

TERMS NET 30 DAYS
1 1/2% PER MONTH (18% PER ANNUM) WILL
BE CHARGED ON ALL INVOICES PAST DUE

SERVICE LOCATION

FLEMING CO
1200 W SUNSET DR
WAUKESHA, WI 53186

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
151449	12/16/01	101778	COMMERCIAL MONTHLY	136	272 00	0 00	272.00

CONTACT **DARYLS DRAGER** PHONE # **262-542-9311** PO #
1ST MONDAY - DO ALL EXT BST ALL INTERIOR TRAPS, LOG BOOK & MSDS
ACT 128
SHEETS ARE IN DARYLS OFFICE, EXTERIOR AND INTERIOR RODENT CONTROL,
STRUCTURAL SANITATION AND PEST MONITORING & INTERIOR CRAWLING INSECT

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE	AMOUNT USED	CONCEN- TRATION	TECH- NICIAN	LOCATIONS OF APPLICATION (Structure, Sites, Outside, Inside)	TECHNIQUE OF APPLICATION	APPROX AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
				<i>None Needed</i>			

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80- COMMON OR BRAND NAME MANUFACTURER EPA REG # PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH E ___ FLYING INSECTS I ___ SANITATION M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS F ___ RODENTS J ___ HARBORAGES N ___ EXTERNAL ENVIRONMENT
C ___ ANTS G ___ BIRDS K ___ VEGETATION O ___ STORAGE
D ___ WOOD DESTROYING INSECTS H ___ MISC INSECTS L ___ INACCESSIBLE AREAS P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

Inspected interior traps
Mice caught at trap # 131 & 23 (both sides of pit)
& #9 & Ball

SEE ADDENDUM ☐

TECHNICIAN SIGNATURE *[Signature]* TECH# *147* DATE *12-26-01* IN *6:22* OUT *7:52* CLIENT SIGNATURE *[Signature]*

LICENSE # *95006102* NOTE: SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT
WHITE LOCATION COPY GREEN PAYMENT COPY PINK CLIENT INVOICE

INVOICE / I.P.M. LOG REPORT



**WIL-KIL
PEST CONTROL**

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STATEWIDE

CLIENT

Celebrating

73

Years
Since 1929

REMIT TO

WIL-KIL PEST CONTROL

PO BOX 13526

MILWAUKEE, WI 53213-0526

TERMS NET 30 DAYS

1 1/2% PER MONTH (18% PER ANNUM) WILL
BE CHARGED ON ALL INVOICES PAST DUE

SERVICE LOCATION

FLEMING CO.
1200 W SUNSET DR.
WAUKESHA, WI 53186

FLEMING CO.
1200 W SUNSET DR.
WAUKESHA, WI 53186

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
224386	05/02/02	101778	COMMERCIAL MONTHLY	136	372.00	0.00	372.00

CONTACT **DARRYL DRAGER** PHONE # **262-542-9311** PO #
1ST MONDAY - DO ALL EXT BST. ALL INTERIOR TRAPS, LOG BOOK & MSDS
ACT 128
SHEETS ARE IN DARYLS OFFICE, EXTERIOR AND INTERIOR RODENT CONTROL,
STRUCTURAL SANITATION AND PEST MONITORING & INTERIOR CRAWLING INSECT

SERVICE & MATERIAL APPLICATION RECORD

DATE	TIME	LOCATION	TYPE OF SERVICE	AMOUNT	SALES TAX	TOTAL
7007	2386	00570	Exterior	BST	N/A	Mice

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80/ COMMON OR BRAND NAME MANUFACTURER E.P.A. REG. # PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS.**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH E ___ FLYING INSECTS I ___ SANITATION M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS F ___ RODENTS J ___ HARBORAGES N ___ EXTERNAL ENVIRONMENT
C ___ ANTS G ___ BIRDS K ___ VEGETATION O ___ STORAGE
D ___ WOOD DESTROYING INSECTS H ___ MISC INSECTS L ___ INACCESSIBLE AREAS P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

Inspected rodent equipment
Interior ~~1000~~ Rat removed on Saturday. No activity today
→ Rat traps removed from produce cooler
Exterior
Feeding at bst #'s 4-11, 18, 23-25, 27-30, 32-36,
38, 41, 42-46, 52-56, 70-72, 76. Bait Replaced
Bait replaced due to weather 12, 19-22, 48-51, 57, 61-62,
64, 67-69.

Woods to be cut down & cooler wall repaired. SEE ADDENDUM ☐
TECHNICIAN SIGNATURE *Cheryl Z. Shu* TECH# 147 DATE 6/17/02 IN 9:00am OUT 4:45pm CLIENT SIGNATURE *[Signature]*

LICENSE #95- 061008

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

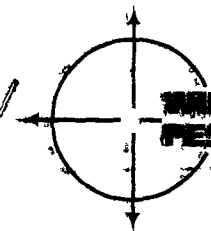
BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

PINK CLIENT INVOICE

• APPLETON (920) 731-2640
 • EAU CLAIRE (715) 835-8203
 • MADISON (608) 248-8665
 • MILWAUKEE (414) 438-8420
 • LA CROSSE (608) 782-7811
 • SCHROEDER (715) 359-0499



**WIL-KIL
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 800-236-8735 • www.wil-kil.com
 STATEWIDE

CLIENT

Fleming Co.
1200 W Sunset Dr.
Waukesha, WI 53188

INVOICE / I.P.M. LOG REPORT

Celebrating
72
Years
 Since 1929

REMIT TO

WIL-KIL PEST CONTRC
 PO BOX 13526
 MILWAUKEE WI 53213-05

TERMS NET 30 DAYS

1 1/2% PER MONTH (18% PER ANNU)
 BE CHARGED ON ALL INVOICES PA

SERVICE LOCATION

Same

INVOICE NUMBER	SOFT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
181431			5th Week Service	147			265

CONTACT

PHONE #

PO #

SERVICE & MATERIAL APPLICATION RECORD

			<i>None Needed Today</i>			

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

E.P.A REG #

PRECAUTION CODE(S)

SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

- | | | | |
|--|--|---|---|
| A <input type="checkbox"/> COCKROACH | E <input checked="" type="checkbox"/> FLYING INSECTS | I <input type="checkbox"/> SANITATION | M <input type="checkbox"/> STRUCTURE |
| B <input type="checkbox"/> STORED PRODUCT INSECTS | F <input type="checkbox"/> RODENTS | J <input type="checkbox"/> HARBORAGES | N <input type="checkbox"/> EXTERNAL ENVIRONMENT |
| C <input type="checkbox"/> ANTS | G <input type="checkbox"/> BIRDS | K <input type="checkbox"/> VEGETATION | O <input type="checkbox"/> STORAGE |
| D <input type="checkbox"/> WOOD DESTROYING INSECTS | H <input type="checkbox"/> MISC INSECTS | L <input type="checkbox"/> INACCESSIBLE AREAS | P <input type="checkbox"/> OTHER |

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

Inspected rodent equipment.
→ No activity at this time.

E) Inspected lunch room, bathroom & shipping office for problems.
→ Garbage & recycling cans need to be scrubbed in these areas
→ Liners for trash cans are to be removed with trash → residue
becomes pest harborage.
→ Recyclables need to be taken 2 times a week instead of
when bin fills up.

SEE ADDENDUM ☐

Alannah Black 147 1-28-02 2:45pm 3:40pm **X** *[Signature]*
 TECHNICIAN SIGNATURE TECH# DATE IN OUT CLIENT SIGNATURE

LICENSE # 95-061228

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE BRANCH

8420
811
FIELD (715) 359-4568



CLIENT

FLEMING CO.
1200 W SUNSET DR.
WAUKESHA, WI 53186

Celebrating
73 Years
Since 1929

WIL-KIL PEST CONTROL
PO BOX 13526
MILWAUKEE WI 53213-0526

TERMS NET 30 DAYS
1 1/2% PER MONTH (18% PER ANNUM)
BE CHARGED ON ALL INVOICES PAST

SERVICE LOCATION

FLEMING CO.
1200 W SUNSET DR.
WAUKESHA, WI 53186

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
211990		101778	COMMERCIAL MONTHLY	136	372.00	0.00	372.00

CONTACT DARYLS DRAGER PHONE # 262-542-9311 PO #
1ST MONDAY - DO ALL EXT BST. ALL INTERIOR TRAPS, LOG BOOK & MSDS
ACT 128
SHEETS ARE IN DARYLS OFFICE, EXTERIOR AND INTERIOR RODENT CONTROL,
STRUCTURAL SANITATION AND PEST MONITORING & INTERIOR CRAWLING INSECT

SERVICE & MATERIAL APPLICATION RECORD

7007	2007	0052	AS Exterior	BST	N/A	Misc

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

*SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A <input type="checkbox"/> COCKROACH	E <input type="checkbox"/> FLYING INSECTS	I <input type="checkbox"/> SANITATION	M <input type="checkbox"/> STRUCTURE
B <input type="checkbox"/> STORED PRODUCT INSECTS	F <input type="checkbox"/> RODENTS	J <input type="checkbox"/> HARBORAGES	N <input type="checkbox"/> EXTERNAL ENVIRONME
C <input type="checkbox"/> ANTS	G <input type="checkbox"/> BIRDS	K <input type="checkbox"/> VEGETATION	O <input type="checkbox"/> STORAGE
D <input type="checkbox"/> WOOD DESTROYING INSECTS	H <input type="checkbox"/> MISC INSECTS	L <input type="checkbox"/> INACCESSIBLE AREAS	P <input type="checkbox"/> OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

Inspected interior & exterior rodent equipment
Exterior → Feeding at 53 & 76, bait replaced, Bait replaced at bait #1's 2
31, 48 & 51 due to weather, etc.
Interior → No activity traps K15, C12, & 2's replaced
*Packing to be moved or cleaned. *Weeds are a prob → need to be re
*Cooler door wall needs repair on docks *Incinerator gap to be fixed
*Spider webs to be removed

SEE ADDENDUM

<i>[Signature]</i>	147	5-20-07	9:00am	1:00pm	X	<i>[Signature]</i>
TECHNICIAN SIGNATURE	TECH#	DATE	IN	OUT		CLIENT SIGNATURE

LICENSE # 95-061228

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

PINK CLIENT IN

80
8203
6665
438-8420
80) 782 7811
715) 359-0466



INVOICE / I.P.M. LOG REPORT

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PO BOX 13526
MILWAUKEE WI 53213-0526
TERMS NET 30 DAYS
1 1/2% PER MONTH (18% PER ANNUM)
BE CHARGED ON ALL INVOICES PAST DUE

CLIENT
FLEMING CO.
1200 W SUNSET DR
WAUKESHA, WI 53186

SERVICE LOCATION
FLEMING CO.
1200 W SUNSET DR.
WAUKESHA, WI 53186

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
77544	07/17/2001	101778	COMM SEASONAL (1/MO)	136	265.00	0.00	265.00

CONTACT DARYLS DRAGER PHONE # 262-542-9311 PO #
1ST MONDAY - DO ALL EXT BST. ALL INTERIOR TRAPS, LOG BOOK & MSDS
ACT 128
SHEETS ARE IN DARYLS OFFICE, EXTERIOR AND INTERIOR RODENT CONTROL,
STRUCTURAL SANITATION AND PEST MONITORING & INTERIOR CRAWLING INSECT

SERVICE & MATERIAL APPLICATION RECORD

DATE	TIME	LOCATION	APPLICATOR	PRODUCT	CONC	REMARKS	REASON FOR	REMARKS	REASON FOR	REMARKS	REASON FOR
						None Needed Today					

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80
COMMON OR BRAND NAME MANUFACTURER EPA REG # PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

- | | | | |
|-------------------------------|----------------------|--------------------------|----------------------------|
| A ___ COCKROACH | E ___ FLYING INSECTS | I ___ SANITATION | M ___ STRUCTURE |
| B ___ STORED PRODUCT INSECTS | F ___ RODENTS | J ___ HARBORAGES | N ___ EXTERNAL ENVIRONMENT |
| C ___ ANTS | G ___ BIRDS | K ___ VEGETATION | O ___ STORAGE |
| D ___ WOOD DESTROYING INSECTS | H ___ MISC INSECTS | L ___ INACCESSIBLE AREAS | P ___ OTHER |

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

Inspected interior rodent equipment
- Traps reset
- No activity at this time

Thank You!

SEE ADDENDUM ☐

TECHNICIAN SIGNATURE <i>[Signature]</i>	TECH# 147	DATE 7-30-01	IN 7:33	OUT 8:55	X	CLIENT SIGNATURE <i>[Signature]</i>
--	--------------	-----------------	------------	-------------	---	--

LICENSE # 95- *061228*

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY BLUE BRANCH YELLOW CORP GREEN PAYMENT COPY PINK CLIENT INVOICE



INVOICE / I.P.M. LOG REPORT

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REMIT TO

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PO BOX 13526

MILWAUKEE WI 53213-0526

TERMS NET 30 DAYS

1 1/2% PER MONTH (18% PER ANNUM)
BE CHARGED ON ALL INVOICES PAST C

CLIENT

FLEMING CO.
1200 W SUNSET DR.
WAUKESHA, WI 53186

SERVICE LOCATION

FLEMING CO.
1200 W SUNSET DR.
WAUKESHA, WI 53186

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
77539	07/15/01	101778	COMMERCIAL MONTHLY	136	272.00	0.00	272.00

CONTACT **DARYLS DRAGER** PHONE # 262-542-9311 PO #
1ST MONDAY - DO ALL EXT BST. ALL INTERIOR TRAPS, LOG BOOK & MSDS
ACT 128

SHEETS ARE IN DARYLS OFFICE, EXTERIOR AND INTERIOR RODENT CONTROL,
STRUCTURAL SANITATION AND PEST MONITORING & INTERIOR CRAWLING INSECT

SERVICE & MATERIAL APPLICATION RECORD

DATE	TIME	LOCATION	APPLICATOR	PRODUCT	CONCENTRATION	APPLICATION	REMARKS
							None Needed Today

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH	E ___ FLYING INSECTS	I ___ SANITATION	M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS	F ___ RODENTS	J ___ HARBORAGES	N ___ EXTERNAL ENVIRONMENT
C ___ ANTS	G ___ BIRDS	K ___ VEGETATION	O ___ STORAGE
D ___ WOOD DESTROYING INSECTS	H ___ MISC INSECTS	L ___ INACCESSIBLE AREAS	P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

Inspected interior rodent equipment
- Mouse removed from trap number 22 → trap cleaned.
- No other rodent activity

Thank You!

SEE ADDENDUM ☐

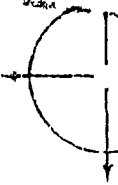
<i>Albert 2010</i>	147	7-23-01	9:30am	11:40am	<i>X</i>	<i>[Signature]</i>
TECHNICIAN SIGNATURE	TECH#	DATE	IN	OUT		CLIENT SIGNATURE
LICENSE # 95- 061878						
*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT						
WHITE LOCATION COPY	BLUE BRANCH	YELLOW CORP	GREEN PAYMENT COPY	PINK CLIENT INVOICE		

SEP-28-2001 FR 11:22 AM COPELAN, INC

FAX NO 262 783 6267

P 04/04

ATTENTION: NEW YORK
FAX CLAIMS (1) (1) (1)
NEW YORK (1) (1) (1)
NEW YORK (1) (1) (1)
NEW YORK (1) (1) (1)
NEW YORK (1) (1) (1)



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STATEWIDE

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TERMS NET 30
1 1/2% PER MONTH (10% PER ANNUM) WITH
BI CHARGED ON ALL INVOICES PAST DUE

CLIENT

SERVICE LOCATION

Flamingo Co
1200 W Sunset Drive
Waukegan, WI 53186

Same

INVOICE NUMBER	BOAT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
77540		10178	Commercial	136			372 ⁰⁰

CONTACT

PHONE #

PO #

Traps & Exterior

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCENTRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structures Sites Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
7007	23oz	005%		Exterior	BST	N/A	Rodent

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#40

DIAMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

*SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

- | | | | |
|------------------------------|----------------------|--------------------------|----------------------------|
| A ___ COCKROACH | E ___ FLYING INSECTS | I ___ SANITATION | M ___ STRUCTURE |
| B ___ STORED PRODUCT INSECTS | F ___ RODENTS | J ___ HARBORAGES | N ___ EXTERNAL ENVIRONMENT |
| C ___ ANTS | G ___ BIRDS | K ___ VEGETATION | O ___ STORAGE |
| D ___ WOOD BORING INSECTS | H ___ MISC INSECTS | L ___ INACCESSIBLE AREAS | P ___ OTHER |

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

Inspected, cleared, & reset interior traps. No activity today.

Inspected & cleaned exterior bait stations.

- Replaced weathered bait in bsts 4, 5, 30, 50, 52, 63, & 68.

- Freshening & bait replaced in bsts 9, 21-25, 47, & 56.

Fixed & cut caulking along interior walls.

SEE ADDENDUM ☐

TECHNICIAN SIGNATURE: *[Signature]* 147 7-2-01 6:30 IN OUT CLIENT SIGNATURE: *[Signature]*

LICENSE # 95- 661228

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

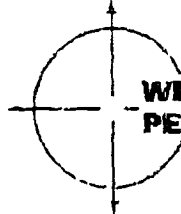
PINK CLIENT INVOICE

SEP-28-2001 FRI 11 22 AM COPESAN, INC

FAX NO 262 783 6267

P 03/04

APPLICATOR (PRINT NAME)
FOLLOWING (PRINT NAME)
TECHNICIAN (PRINT NAME)
MILWAUKEE (PRINT NAME)
DATE (PRINT DATE)



**WIL-KIL
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STATEWIDE

CLIENT

FLEMING CO.
1200 W SUNSET DR
WILKESHA, WI 53186

INVOICE / I.P.M. LOG REPORT

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72
Years
Since 1929

REMIT TO

WIL-KIL PEST CONTROL
PO BOX 13526
MILWAUKEE WI 53213-0526

TERMS NET 30 DAYS

1.12% PER MONTH (18% PER ANNUM)
BE CHARGED ON ALL INVOICES PAST DL

SERVICE LOCATION

FLEMING CO.
1200 W SUNSET DR
WILKESHA, WI 53186

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
77540	07/01/01	101770	COMMERCIAL MONTHLY	136	372.00	0.00	372.00

CONTACT: AYL DRAGLP PHONE # 262-540-7311 PO #
1ST MONDAY DO ALL EXT BST ALL INTERIOR TRAPS, LOG BOOK & MSDS
NOT 120
SCHEDULE APPE IN DARYLS OFFICE, EXTERIOR AND INTERIOR RODENT CONTROL,
STRUCTURAL SANITATION AND PEST MONITORING & INTERIOR CRAWLING INSECT

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCENTRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structures, Sheds, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

*SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A _ COCKROACH E _ FLYING INSECTS I _ SANITATION M _ STRUCTURE
B _ STORED PRODUCT INSECTS F _ RODENTS J _ HARBORAGES N _ EXTERNAL ENVIRONMENT
C _ ANTS G _ BIRDS K _ VEGETATION O _ STORAGE
D _ WOOD DESTROYING INSECTS H _ MISC INSECTS L _ INACCESSIBLE AREAS P _ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

SEE ADDENDUM ☐

TECHNICIAN SIGNATURE

TECH#

DATE

IN

OUT

CLIENT SIGNATURE

LICENSE #55

NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

ON (920) 731 2640
 CLAIR (715) 835 8203
 SUN PRAIRIE (608) 825 1000
 MILWAUKEE (414) 438 8420
 LA CROSSE (608) 782 7811
 SCHOFIELD (715) 359 4568



**WIL-KIL
 PEST CONTROL**

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 STATEWIDE

INVOICE

Celebrating
73 Years
 Since 1929

REMIT TO

WIL-KIL PEST CONTROL
 PO BOX 13526
 MILWAUKEE, WI 53213-0526

TERMS NET 30 DAYS

1 1/2% PER MONTH (18% PER ANNUM) WILL
 BE CHARGED ON ALL INVOICES PAST DUE

CLIENT

SERVICE LOCATION

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
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CONTACT

PHONE #

PO #

90-10

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL *CODE#	AMOUNT USED	CONCEN- TRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
				None Used			

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

- | | | | |
|-------------------------------|----------------------|--------------------------|----------------------------|
| A ___ COCKROACH | E ___ FLYING INSECTS | I ___ SANITATION | M ___ STRUCTURE |
| B ___ STORED PRODUCT INSECTS | F ___ RODENTS | J ___ HARBORAGES | N ___ EXTERNAL ENVIRONMENT |
| C ___ ANTS | G ___ BIRDS | K ___ VEGETATION | O ___ STORAGE |
| D ___ WOOD DESTROYING INSECTS | H ___ MISC INSECTS | L ___ INACCESSIBLE AREAS | P ___ OTHER |

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

TRKPPS INACCESSIBLE today were 9, 13, 20, 22, 33 in in-
 stepped & dated. All other traps, No
 activity w/s found on reports on unit

SEE ADDENDUM ☐

Technician Signature: Greg J. Peterson
 License # 95-026235
 Tech # 42610-2417
 Date 4/26/2017
 In AM 7:30
 Out PM 8:00
 Client Signature: [Signature]

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY BLUE BRANCH YELLOW CORP GREEN PAYMENT COPY PINK CLIENT INVOICE

INVOICE



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MILWAUKEE, WI 53213-0526

TERMS NET 30 DAYS

1 1/2% PER MONTH (18% PER ANNUM) WILL
BE CHARGED ON ALL INVOICES PAST DUE

CLIENT

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

SERVICE LOCATION

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
335482	01/24/03	154555	Ext. / Int. Rodent Co	142	45.00	0.00	45.00

CONTACT **BOB**

PHONE # 414-453-4790

PO #

WEEKLY SERV. ON FRIDAYS: ASI INSPECTED ACCT. LOG BOOK, MSDS SHEETS
& LABELS IN BOB'S OFFICE. INTERIOR & EXTERIOR RODENT CONTROL.
LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO
SERVICE & MAINTAIN THE

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCEN- TRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

☐ OVER 5 GALLONS WAS MIXED AT THIS SITE.

#80

COMMON OR BRAND NAME

MANUFACTURER

E.P.A. REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

- | | | | |
|--|---|---|---|
| A <input type="checkbox"/> COCKROACH | E <input type="checkbox"/> FLYING INSECTS | I <input type="checkbox"/> SANITATION | M <input type="checkbox"/> STRUCTURE |
| B <input type="checkbox"/> STORED PRODUCT INSECTS | F <input checked="" type="checkbox"/> RODENTS | J <input type="checkbox"/> HARBORAGES | N <input type="checkbox"/> EXTERNAL ENVIRONMENT |
| C <input type="checkbox"/> ANTS | G <input type="checkbox"/> BIRDS | K <input type="checkbox"/> VEGETATION | O <input type="checkbox"/> STORAGE |
| D <input type="checkbox"/> WOOD DESTROYING INSECTS | H <input type="checkbox"/> MISC INSECTS | L <input type="checkbox"/> INACCESSIBLE AREAS | P <input type="checkbox"/> OTHER |

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

(F) checked all rodent equipment and
no problems were found or reported
could not access #10 thru #16 door was
locked.
THANK YOU!

SEE ADDENDUM ☐

<i>Bruce Schoonmy</i>	189	1-24-3	8:00 PM	12:00 AM	<i>X Gail Erdmann</i>
TECHNICIAN NAME	TECH#	DATE	IN	OUT	CLIENT SIGNATURE
LICENSE # 95- 008173	*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT				
WHITE LOCATION COPY	BLUE BRANCH	YELLOW CORP	GREEN PAYMENT COPY	PINK CLIENT INVOICE	

APPLETON (920) 731-2840
 EAU CLAIRE (715) 835-8203
 SUN PRAIRIE (800) 825-1000
 MILWAUKEE (414) 438-8430
 LA CROSSE (608) 782-7811
 SCHOFIELD (715) 358-4568



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TERMS NET 30 DAYS

1 1/2% PER MONTH (18% PER ANNUM) W
 BE CHARGED ON ALL INVOICES PAST D

CLIENT

CRESTWOOD BAKERY
 1710 S 108TH STREET
 MILWAUKEE, WI 53214

SERVICE LOCATION

CRESTWOOD BAKERY
 1710 S 108TH STREET
 MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
335721	01/24/03	154555	BIO DRAIN SERVICE	142	95.00	0.00	95.00

CONTACT **BOB** PHONE # **414-453-4790** PO #
 WEEKLY SERV. ON FRIDAYS: ASI INSPECTED ACCT. LOG BOOK, MSDS SHEETS
 & LABLES IN BOB'S OFFICE. INTERIOR & EXTERIOR RODENT CONTROL.
 LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO
 SERVICE & MAINTAIN THE

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCENTRATION	LOT	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
12/08	4/gal	0.6		Interior - Drains	Bio	All drains	fruit flys

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

☐ OVER 5 GALLONS WAS MIXED AT THIS SITE

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ☐ COCKROACH
 B ☐ STORED PRODUCT INSECTS
 C ☐ ANTS
 D ☐ WOOD DESTROYING INSECTS

E ☒ FLYING INSECTS
 F ☐ RODENTS
 G ☐ BIRDS
 H ☐ MISC INSECTS

I ☐ SANITATION
 J ☐ HARBORAGES
 K ☐ VEGETATION
 L ☐ INACCESSIBLE AREAS

M ☐ STRUCTURE
 N ☐ EXTERNAL ENVIRONMENT
 O ☐ STORAGE
 P ☐ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

(E) Treated all drains today to
 control and prevent fruit flys

THANK YOU!

SEE ADDENDUM ☐

Bruce Schoening 139 1-24-3 AM 8:00 PM 12:00 PM X Gail Erdmann
 TECHNICIAN NAME TECH# DATE IN OUT CLIENT SIGNATURE

LICENSE # 95- 008123

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

PINK CLIENT INVOICE

INVOICE



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1 1/2% PER MONTH (18% PER ANNUM)
BE CHARGED ON ALL INVOICES PAST DUE

CLIENT

SERVICE LOCATION

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
338856	02/07/03	154555	COMMERCIAL WEEKLY	142	245.00	0.00	245.00

CONTACT **DENNIS** PHONE # **414-453-4790** PO #
WEEKLY SERV. ON FRIDAYS: ASI INSPECTED ACCT. LOG BOOK, MSDS SHEETS & LABLES IN BOB'S OFFICE. INTERIOR & EXTERIOR RODENT CONTROL. LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO SERVICE & MAINTAIN THE

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL *CODE#	AMOUNT USED	CONCENTRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

☐ OVER 5 GALLONS WAS MIXED AT THIS SITE

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ☐ COCKROACH E ☒ FLYING INSECTS I ☐ SANITATION M ☐ STRUCTURE
B ☐ STORED PRODUCT INSECTS F ☒ RODENTS J ☐ HARBORAGES N ☐ EXTERNAL ENVIRONMENT
C ☐ ANTS G ☐ BIRDS K ☐ VEGETATION O ☐ STORAGE
D ☐ WOOD DESTROYING INSECTS H ☐ MISC INSECTS L ☐ INACCESSIBLE AREAS P ☐ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

① changed all rodent traps today. Could not access #35, 42, 43, 44 due to locked door to pellets.

② Noted more wd floor beetle activity in light traps today.

THANK YOU!

SEE ADDENDUM ☐

Bruce Schoening
TECHNICIAN NAME

139
TECH#

2-7-3
DATE

AM 6:30
IN

AM 10:30
OUT

X Verbal Mike
CLIENT SIGNATURE

LICENSE # 95- *008173*

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

PINK CLIENT INVOI

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TERMS NET 30 DAYS
1 1/2% PER MONTH (18% PER ANNUM) WILL
BE CHARGED ON ALL INVOICES PAST DUE

CLIENT

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

SERVICE LOCATION

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
346510	02/07/03	154555	Ext. / Int. Rodent Cd	142	45.00	0.00	45.00

CONTACT **DENNIS** PHONE # **414-453-4790** PO #
WEEKLY SERV. ON FRIDAYS: ASI INSPECTED ACCT. LOG BOOK, MSDS SHEETS
& LABELS IN BOB'S OFFICE. INTERIOR & EXTERIOR RODENT CONTROL.
LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO
SERVICE & MAINTAIN THE

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCEN- TRATION	LOT	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

☐ OVER 5 GALLONS WAS MIXED AT THIS SITE

#80

COMMON OR BRAND NAME

MANUFACTURER

E.P.A. REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH E ___ FLYING INSECTS I ___ SANITATION M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS F ☒ RODENTS J ___ HARBORAGES N ___ EXTERNAL ENVIRONMENT
C ___ ANTS G ☒ BIRDS K ___ VEGETATION O ___ STORAGE
D ___ WOOD DESTROYING INSECTS H ___ MISC INSECTS L ___ INACCESSIBLE AREAS P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

ⓔ checked all rodent equipment
and no problems were found or
reported by staff.
THANK YOU!

SEE ADDENDUM ☐

TECHNICIAN NAME Bruce Schoen TECH# 139 DATE 2-7-3 IN 6:30 PM OUT 10:30 PM CLIENT SIGNATURE X Ubal Mike

LICENSE # 95- 00815 *NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY BLUE BRANCH YELLOW CORP GREEN PAYMENT COPY PINK CLIENT INVOICE

APPLETON (920) 731 2640
EAU CLAIRE (715) 835-8203
SUN PRAIRIE (800) 825-1000
MILWAUKEE (414) 438-8420
LA CROSSE (608) 782 7811
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TERMS NET 30 DAYS
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CLIENT

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

SERVICE LOCATION

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
346733	02/07/03	154555	BIO DRAIN SERVICE	142	95.00	0.00	95.00

CONTACT **DENNIS** PHONE # **414-453-4790** PO #
WEEKLY SERV. ON FRIDAYS: ASI INSPECTED ACCT. LOG BOOK, MSDS SHEETS
& LABLES IN BOB'S OFFICE. INTERIOR & EXTERIOR RODENT CONTROL.
LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO
SERVICE & MAINTAIN THE

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL *CODE#	AMOUNT USED	CONCEN- TRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
1408	4 gal	106	-	Interior Drains	Bio	All drains	fruit fly

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

☐ OVER 5 GALLONS WAS MIXED AT THIS SITE

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ☐ COCKROACH
B ☐ STORED PRODUCT INSECTS
C ☐ ANTS
D ☐ WOOD DESTROYING INSECTS

E ☒ FLYING INSECTS
F ☐ RODENTS
G ☐ BIRDS
H ☐ MISC INSECTS

I ☐ SANITATION
J ☐ HARBORAGES
K ☐ VEGETATION
L ☐ INACCESSIBLE AREAS

M ☐ STRUCTURE
N ☐ EXTERNAL ENVIRONMENT
O ☐ STORAGE
P ☐ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

④ Treated all drains for fruit fly activity today

THANK YOU!

SEE ADDENDUM ☐

Boice Schoenig	139	2-73	AM 6:00	AM 10:30	X Verbal Mike
TECHNICIAN NAME	TECH#	DATE	IN	OUT	CLIENT SIGNATURE
LICENSE # 95- 000115	*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT				
WHITE LOCATION COPY	BLUE BRANCH	YELLOW CORP	GREEN PAYMENT COPY	PINK CLIENT INVOICE	

• APPLETON (820) 731 2640
 • BAU CLAIRE (715) 835 8203
 • SUN PRAIRIE (808) 25 1000
 • MILWAUKEE (414) 413-8420
 • LA CROSSE (608) 782 7811
 • SCHOFIELD (715) 344-4568



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1 1/2% PER MONTH (18% PER ANNUM) WILL
 BE CHARGED ON ALL INVOICES PAST DUE

CLIENT

CRESTWOOD BAKERY
 1710 S 108TH STREET
 MILWAUKEE, WI 53214

SERVICE LOCATION

CRESTWOOD BAKERY
 1710 S 108TH STREET
 MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
346736	02/28/03	154555	BIO DRAIN SERVICE	142	95.00	0.00	95.00

CONTACT **DENNIS** PHONE # **414-453-4790** PO #
 WEEKLY SERV. ON FRIDAYS: ASI INSPECTED ACCT. LOG BOOK, MSDS SHEETS
 & LABLES IN BOB'S OFFICE. INTERIOR & EXTERIOR RODENT CONTROL.
 LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO
 SERVICE & MAINTAIN THE

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL *CODE#	AMOUNT USED	CONCEN- TRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
1408	4901.06	—	—	Interim drains	BIO	All drains	fruit fly

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

☐ OVER 5 GALLONS WAS MIXED AT THIS SITE

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH E ☒ FLYING INSECTS I ___ SANITATION M ___ STRUCTURE
 B ___ STORED PRODUCT INSECTS F ☒ RODENTS J ___ HARBORAGES N ___ EXTERNAL ENVIRONMENT
 C ___ ANTS G ___ BIRDS K ___ VEGETATION O ___ STORAGE
 D ___ WOOD DESTROYING INSECTS H ___ MISC INSECTS L ___ INACCESSIBLE AREAS P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

(E) treated all drains today to
 control and prevent fruit fly activity
 THANK YOU!

SEE ADDENDUM ☐

TECHNICIAN NAME <i>Bruce Schoenir</i>	TECH# 139	DATE 2-26-03	IN 11:30 AM	OUT 1:00 PM	CLIENT SIGNATURE <i>X [Signature]</i>
LICENSE # 95- <i>008173</i>	*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT				
WHITE LOCATION COPY	BLUE BRANCH	YELLOW CORP	GREEN PAYMENT COPY	PINK CLIENT INVOICE	

INVOICE / I.P.M. LOG REPORT



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PO BOX 13526

MILWAUKEE, WI 53213-0526

TERMS NET 30 DAYS

1 1/2% PER MONTH (18% PER ANNUM) WIL
BE CHARGED ON ALL INVOICES PAST DUE

CLIENT

SERVICE LOCATION

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
357737	03/07/03	154555	BIO DRAIN SERVICE	142	95.00	0.00	95.00

CONTACT

PHONE #

PO #

DENNIS

414-453-4790

WEEKLY SERV. ON FRIDAYS: ASI INSPECTED ACCT. LOG BOOK, MSDS SHEETS
& LABLES IN BOB'S OFFICE. INTERIOR & EXTERIOR RODENT CONTROL.
LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO
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SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCEN- TRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
1408	4 gal	06	-	Interior Drains	BIO	All drains	Fruit flies

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

*SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH E ☒ FLYING INSECTS I ___ SANITATION M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS F ___ RODENTS J ___ HARBORAGES N ___ EXTERNAL ENVIRONMENT
C ___ ANTS G ___ BIRDS K ___ VEGETATION O ___ STORAGE
D ___ WOOD DESTROYING INSECTS H ___ MISC INSECTS L ___ INACCESSIBLE AREAS P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

(E) Treated all accessible drains today to
control any and all fruit fly activity
Fruit fly population seems to be down today.

THANK YOU!

SEE ADDENDUM ☐

<i>Paul Schoenig</i>	139	3-6-3	6:30	10:30	<input checked="" type="checkbox"/> <i>Gail Erdmann</i>
TECHNICIAN SIGNATURE	TECH#	DATE	IN	OUT	CLIENT SIGNATURE

LICENSE # 95- 208173

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

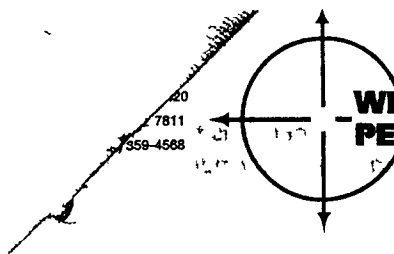
BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

PINK CLIENT INVOICE

INVOICE / I.P.M. LOG REPORT



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CLIENT

SERVICE LOCATION

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
357488	03/07/03	154555	Ext. / Int. Rodent Co	142	45.00	0.00	45.00

CONTACT

DENNIS

PHONE #

414-453-4790

PO #

WEEKLY SERV. ON FRIDAYS: ASI INSPECTED ACCT. LOG BOOK, MSDS SHEETS
& LABLES IN BOB'S OFFICE. INTERIOR & EXTERIOR RODENT CONTROL.
LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO
SERVICE & MAINTAIN THE

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCEN- TRATION	LOT	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
7007	1oz	.005	-	Extens bait station	BST	1oz per	Mice

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80 COMMON OR BRAND NAME MANUFACTURER E.P.A. REG # PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH E ___ FLYING INSECTS I ___ SANITATION M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS F ☒ RODENTS J ___ HARBORAGES N ___ EXTERNAL ENVIRONMENT
C ___ ANTS G ___ BIRDS K ___ VEGETATION O ___ STORAGE
D ___ WOOD DESTROYING INSECTS H ___ MISC INSECTS L ___ INACCESSIBLE AREAS P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

(F) checked all rodent equipment and
light feeding was found on southeast bait
station today. Added bait as needed and
no interior catches were found

THANK YOU!

SEE ADDENDUM ☐

Paul Schornir 139 3-6-3 6:30 10:30 X Gail Erdmann
TECHNICIAN SIGNATURE TECH# DATE IN OUT CLIENT SIGNATURE

LICENSE # 95-008173 *NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY BLUE BRANCH YELLOW CORP GREEN PAYMENT COPY PINK CLIENT INVOICE

- APPLETON (920) 731 2640
- EAU CLAIRE (715) 835-8203
- MADISON (608) 835-1000
- MILWAUKEE (414) 438-8420
- LA CROSSE (608) 782 7811
- SCHOFIELD (715) 359-4568



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1 1/2% PER MONTH (18% PER ANNUM) V
BE CHARGED ON ALL INVOICES PAST D

CLIENT

SERVICE LOCATION

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
349822	03/07/03	154555	COMMERCIAL WEEKLY	142	245.00	0.00	245.00

CONTACT DENNIS PHONE # 414-453-4790 PO #
WEEKLY SERV. ON FRIDAYS: ASI INSPECTED ACCT. LOG BOOK, MSDS SHEETS
& LABLES IN BOB'S OFFICE. INTERIOR & EXTERIOR RODENT CONTROL.
LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO
SERVICE & MAINTAIN THE

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCEN- TRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH E ___ FLYING INSECTS I ___ SANITATION M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS F ☒ RODENTS J ___ HARBORAGES N ___ EXTERNAL ENVIRONMENT
C ___ ANTS G ___ BIRDS K ___ VEGETATION O ___ STORAGE
D ___ WOOD DESTROYING INSECTS H ___ MISC INSECTS L ___ INACCESSIBLE AREAS P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

① Light feeding at station #9 but no additional
bait was required. Could not access 35, 41, 42, 43, 65,
72, 73, 74 due to locked doors or pallets. No other
problems were found or reported today
THANK YOU!

SEE ADDENDUM ☐

TECHNICIAN SIGNATURE *Bruce Schwenning* TECH# 139 DATE 3-6-3 IN 6:30 OUT 10:30 CLIENT SIGNATURE *X Gail Erdmann*

LICENSE # 95- 008173

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE. BRANCH

YELLOW CORP

GREEN PAYMENT COPY

PINK CLIENT INVOICE

INVOICE / I.P.M. LOG REPORT

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CLIENT

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

SERVICE LOCATION

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
357489	03/14/03	154555	Ext. / Int. Rodent Co	142	45.00	0.00	45.00

CONTACT

PHONE #

PO #

DENNIS

414-453-4790

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& LABELS IN BOB'S OFFICE. INTERIOR & EXTERIOR RODENT CONTROL.
LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO
SERVICE & MAINTAIN THE

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL *CODE#	AMOUNT USED	CONCEN- TRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH	E ___ FLYING INSECTS	I ___ SANITATION	M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS	F <input checked="" type="checkbox"/> RODENTS	J ___ HARBORAGES	N ___ EXTERNAL ENVIRONMENT
C ___ ANTS	G ___ BIRDS	K ___ VEGETATION	O ___ STORAGE
D ___ WOOD DESTROYING INSECTS	H ___ MISC INSECTS	L ___ INACCESSIBLE AREAS	P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

*checked all 10 ft equipment and
no problems were found today or
reported*

THANK YOU!

SEE ADDENDUM ☐

<i>Paul Schoen</i>	139	3-14-03	7.00	10.00	<input checked="" type="checkbox"/>	<i>Gail Erdmann</i>
TECHNICIAN SIGNATURE	TECH#	DATE	IN	OUT		CLIENT SIGNATURE

LICENSE # 95- 008197

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

PINK CLIENT INVOICE

INVOICE / I.P.M. LOG REPORT

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1710 S 108TH STREET
MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
357738	03/14/03	154555	BIO DRAIN SERVICE	142	95.00	0.00	95.00

CONTACT

PHONE #

PO #

DENNIS

414-453-4790

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LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO
SERVICE & MAINTAIN THE

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCENTRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
1408	4 gal	06	-	Interior drains	Bio	All drains	fruit fly

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

*SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH E ☒ FLYING INSECTS I ___ SANITATION M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS F ☒ RODENTS J ___ HARBORAGES N ___ EXTERNAL ENVIRONMENT
C ___ ANTS G ___ BIRDS K ___ VEGETATION O ___ STORAGE
D ___ WOOD DESTROYING INSECTS H ___ MISC INSECTS L ___ INACCESSIBLE AREAS P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

① All ~~1408~~ drains were treated
today to control and prevent
fruit fly activity
THANK YOU!

SEE ADDENDUM ☐

TECHNICIAN SIGNATURE Bruce Schoen TECH# 139 DATE 3-14-3 IN 7:00 OUT 10:00 ☒ Sailer CLIENT SIGNATURE

LICENSE # 95- 008173

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

PINK. CLIENT INVOICE

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 CLARE (715) 835-8203
 MADISON (808) 875-1000
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 MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
349823	03/14/03	154555	COMMERCIAL WEEKLY	142	245.00	0.00	245.00

CONTACT DENNIS PHONE # 414-453-4790 PO #
 WEEKLY SERV. ON FRIDAYS: ASI INSPECTED ACCT. LOG BOOK, MSDS SHEETS
 & LABLES IN BOB'S OFFICE. INTERIOR & EXTERIOR RODENT CONTROL.
 LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO
 SERVICE & MAINTAIN THE

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCEN- TRATION	LOT	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80 COMMON OR BRAND NAME MANUFACTURER EPA REG # PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

- | | | | |
|-------------------------------|---|--------------------------|----------------------------|
| A ___ COCKROACH | E ___ FLYING INSECTS | I ___ SANITATION | M ___ STRUCTURE |
| B ___ STORED PRODUCT INSECTS | F <input checked="" type="checkbox"/> RODENTS | J ___ HARBORAGES | N ___ EXTERNAL ENVIRONMENT |
| C ___ ANTS | G ___ BIRDS | K ___ VEGETATION | O ___ STORAGE |
| D ___ WOOD DESTROYING INSECTS | H ___ MISC INSECTS | L ___ INACCESSIBLE AREAS | P ___ OTHER |

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

(F) checked all 10 doors & 19 signs on 2 110
 problems were found Also replaced all
 insect light traps light bulbs & all
 glue boards
 THANK you!

SEE ADDENDUM ☐

Bruce Schoen TECHNICIAN SIGNATURE LICENSE # 95- 208175	139 TECH#	3-14-3 DATE	11:00 IN	10:00 OUT	X Gail Erdman CLIENT SIGNATURE
NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT					
WHITE LOCATION COPY	BLUE BRANCH	YELLOW CORP	GREEN PAYMENT COPY	PINK CLIENT INVOICE	

INVOICE / I.P.M. LOG REPORT



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SERVICE LOCATION

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
357490	03/21/03	154555	Ext. / Int. Rodent Co	142	45.00	0.00	45.00

CONTACT

DENNIS

PHONE #

414-453-4790

PO #

WEEKLY SERV. ON FRIDAYS: ASI INSPECTED ACCT. LOG BOOK, MDS SHEETS
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LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO
SERVICE & MAINTAIN THE

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCEN- TRATION	LOT	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH
B ___ STORED PRODUCT INSECTS
C ___ ANTS
D ___ WOOD DESTROYING INSECTS

E ___ FLYING INSECTS
F ☒ RODENTS
G ___ BIRDS
H ___ MISC INSECTS

I ___ SANITATION
J ___ HARBORAGES
K ___ VEGETATION
L ___ INACCESSIBLE AREAS

M ___ STRUCTURE
N ___ EXTERNAL ENVIRONMENT
O ___ STORAGE
P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

④ Checked all 14 terms & after
rodent equipment and 170 problems were
found today
THANK YOU!

SEE ADDENDUM ☐

TECHNICIAN SIGNATURE Boone Schoon TECH# 139 DATE 3-20-03 IN 7:00 OUT 11:20 CLIENT SIGNATURE X J. Galdeman

LICENSE # 95- 008193

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

PINK CLIENT INVOICE

INVOICE / I.P.M. LOG REPORT



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TERMS NET 30 DAYS
1 1/2% PER MONTH (18% PER ANNUM) WILL
BE CHARGED ON ALL INVOICES PAST DUE

SERVICE LOCATION

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
349824	03/21/03	154555	COMMERCIAL WEEKLY	142	245.00	0.00	245.00

CONTACT **DENNIS** PHONE # **414-453-4790** PO #
WEEKLY SERV. ON FRIDAYS: ASI INSPECTED ACCT. LOG BOOK, MSDS SHEETS
& LABLES IN BOB'S OFFICE. INTERIOR & EXTERIOR RODENT CONTROL.
LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO
SERVICE & MAINTAIN THE

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCEN- TRATION	LOT	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
7007	2oz	.015	-	Extern Bait Station	PST	102 per	Mice

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ☐ COCKROACH
B ☐ STORED PRODUCT INSECTS
C ☐ ANTS
D ☐ WOOD DESTROYING INSECTS
E ☒ FLYING INSECTS
F ☒ RODENTS
G ☐ BIRDS
H ☐ MISC INSECTS
I ☐ SANITATION
J ☐ HARBORAGES
K ☐ VEGETATION
L ☐ INACCESSIBLE AREAS
M ☐ STRUCTURE
N ☐ EXTERNAL ENVIRONMENT
O ☐ STORAGE
P ☐ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

(F) checked all exteriors & interior traps and
light feeding found on exterior @ #9 & #12 Replaced
bait caught one mouse on interior in trap #38
(E) Noted increase at light traps due to new
bulbs

SEE ADDENDUM ☐

TECHNICIAN SIGNATURE Bruce Schoen TECH# 139 DATE 3-19-03 IN 7:00 OUT 11:20 CLIENT SIGNATURE X. G. Erdmann
LICENSE # 95- 008173

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

PINK CLIENT INVOICE

WIL-KIL PEST CONTROL
 MILWAUKEE (920) 731 2640
 WAUKESHA (716) 835-8203
 MADISON (608) 825-1000
 MILWAUKEE (414) 438-8420
 LA CROSSE (608) 782 7811
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 1 1/2% PER MONTH (18% PER ANNUM) !
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CLIENT

SERVICE LOCATION

CRESTWOOD BAKERY
 1710 S 108TH STREET
 MILWAUKEE, WI 53214

CRESTWOOD BAKERY
 1710 S 108TH STREET
 MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
357739	03/21/03	154555	BIO DRAIN SERVICE	142	95.00	0.00	95.00

CONTACT DENNIS PHONE # 414-453-4790 PO #
 WEEKLY SERV. ON FRIDAYS: ASI INSPECTED ACCT. LOG BOOK, MSDS SHEETS & LABELS IN BOB'S OFFICE. INTERIOR & EXTERIOR RODENT CONTROL. LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO SERVICE & MAINTAIN THE

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCENTRATION	LOT	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX AREA OR VOLUME TREATED	TARGET PESTS (OR PESTS)
1408	4981	06	-	Inter. drains	Bio	All drains	fruit fly

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80 COMMON OR BRAND NAME MANUFACTURER E.P.A. REG # PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

- A ___ COCKROACH
- B ___ STORED PRODUCT INSECTS
- C ___ ANTS
- D ___ WOOD DESTROYING INSECTS
- E ☒ FLYING INSECTS
- F ___ RODENTS
- G ___ BIRDS
- H ___ MISC INSECTS
- I ___ SANITATION
- J ___ HARBORAGES
- K ___ VEGETATION
- L ___ INACCESSIBLE AREAS
- M ___ STRUCTURE
- N ___ EXTERNAL ENVIRONMEN
- O ___ STORAGE
- P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

① Treated all accessible floor drains today to control and prevent fruit fly activity
 THANK YOU!

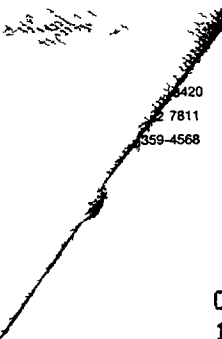
SEE ADDENDUM ☐

Barne Schoenig 139 3-20-3 7.00 11:20 X Gail Erdman
 TECHNICIAN SIGNATURE TECH# DATE IN OUT CLIENT SIGNATURE

LICENSE # 95- 008193 *NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY BLUE BRANCH YELLOW CORP GREEN PAYMENT COPY PINK CLIENT INVOIC

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CLIENT

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

SERVICE LOCATION

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
357740	03/28/03	154555	BIO DRAIN SERVICE	142	95.00	0.00	95.00

CONTACT

DENNIS

PHONE #

414-453-4790

PO #

WEEKLY SERV. ON FRIDAYS: ASI INSPECTED ACCT. LUG BOOK, MSDS SHEETS
& LABLES IN BOB'S OFFICE. INTERIOR & EXTERIOR RODENT CONTROL.
LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO
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SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCEN- TRATION	LOT	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
1408	4 gal	0.02	-	Interior Drains	Bio	All Drains	fruit fly

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH E ☒ FLYING INSECTS I ___ SANITATION M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS F ☒ RODENTS J ___ HARBORAGES N ___ EXTERNAL ENVIRONMENT
C ___ ANTS G ___ BIRDS K ___ VEGETATION O ___ STORAGE
D ___ WOOD DESTROYING INSECTS H ___ MISC INSECTS L ___ INACCESSIBLE AREAS P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

~~(E) checked all rodent equipment except~~
Treated all drains today to control and
~~examine on south side due to stopping water~~
prevent fruit flies
~~the problem was found today~~

THANK YOU!

SEE ADDENDUM ☐

Bruce Schoenn	139	3-28-3	8:00	12:30	X	SEE ADDENDUM
TECHNICIAN SIGNATURE	TECH#	DATE	IN	OUT	CLIENT SIGNATURE	
LICENSE # 95- 008173						
WHITE LOCATION COPY	BLUE BRANCH	YELLOW CORP	GREEN PAYMENT COPY	PINK CLIENT INVOICE		

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

INVOICE / I.P.M. LOG REPORT



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PO BOX 13526
MILWAUKEE, WI 53213-0526

TERMS NET 30 DAYS

1 1/2% PER MONTH (18% PER ANNUM) WIL
BE CHARGED ON ALL INVOICES PAST DUE

CLIENT

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

SERVICE LOCATION

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
349825	03/28/03	154555	COMMERCIAL WEEKLY	142	245.00	0.00	245.00

CONTACT **DENNIS** PHONE # **414-453-4790** PO #
WEEKLY SERV. ON FRIDAYS: ASI INSPECTED ACCT. LOG BOOK, MSDS SHEETS
& LABELS IN BOB'S OFFICE. INTERIOR & EXTERIOR RODENT CONTROL.
LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO
SERVICE & MAINTAIN THE

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCENTRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ☐ COCKROACH E ☐ FLYING INSECTS I ☐ SANITATION M ☐ STRUCTURE
B ☐ STORED PRODUCT INSECTS F ☒ RODENTS J ☐ HARBORAGES N ☐ EXTERNAL ENVIRONMENT
C ☐ ANTS G ☐ BIRDS K ☐ VEGETATION O ☐ STORAGE
D ☐ WOOD DESTROYING INSECTS H ☐ MISC INSECTS L ☐ INACCESSIBLE AREAS P ☐ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

(F) Caught one mouse in extern #6 checked
all interior traps. Could not access #12, 43, 44
and #84, 86 due to locked doors to pallets. No
problems were found or reported
THANK YOU!

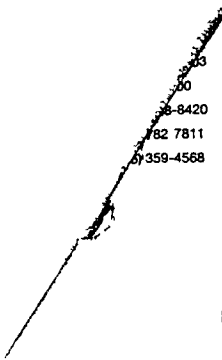
SEE ADDENDUM ☐

Bruce Schoenig TECHNICIAN SIGNATURE LICENSE # 95- 008173	139 TECH#	3 28-3 DATE	8 00 IN	12 30 OUT	[Signature] CLIENT SIGNATURE
--	--------------	----------------	------------	--------------	---------------------------------

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY BLUE BRANCH YELLOW CORP GREEN PAYMENT COPY PINK CLIENT INVOICE

INVOICE / I.P.M. LOG REPORT



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TERMS NET 30 DAYS

1 1/2% PER MONTH (18% PER ANNUM) WIL
BE CHARGED ON ALL INVOICES PAST DUE

CLIENT

SERVICE LOCATION

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
357491	03/28/03	154555	Ext. / Int. Rodent Co	142	45.00	0.00	45.00

CONTACT

PHONE #

PO #

DENNIS

414-453-4790

WEEKLY SERV. ON FRIDAYS: ASI INSPECTED ACCT. LUG BOOK, MSDS SHEETS
& LABLES IN BOB'S OFFICE. INTERIOR & EXTERIOR RODENT CONTROL.
LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO
SERVICE & MAINTAIN THE

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCEN- TRATION	LOT	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

E.P.A. REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

- | | | | |
|-------------------------------|---|--------------------------|----------------------------|
| A ___ COCKROACH | E ___ FLYING INSECTS | I ___ SANITATION | M ___ STRUCTURE |
| B ___ STORED PRODUCT INSECTS | F <input checked="" type="checkbox"/> RODENTS | J ___ HARBORAGES | N ___ EXTERNAL ENVIRONMENT |
| C ___ ANTS | G ___ BIRDS | K ___ VEGETATION | O ___ STORAGE |
| D ___ WOOD DESTROYING INSECTS | H ___ MISC INSECTS | L ___ INACCESSIBLE AREAS | P ___ OTHER |

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

(F) Checked all rodent equipment except
exterior on southside due to standing
water. No problems were found.

THANK YOU!!

SEE ADDENDUM ☐

Technician Signature <i>Bruce Schocuing</i> LICENSE # 95- <u>008173</u>	TECH# <u>139</u>	DATE <u>3/28/03</u>	IN <u>8:00</u>	OUT <u>12:30</u>	CLIENT SIGNATURE <i>[Signature]</i>
---	------------------	---------------------	----------------	------------------	--

*NOTE: SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY BLUE BRANCH YELLOW CORP GREEN PAYMENT COPY PINK CLIENT INVOICE

INVOICE



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MILWAUKEE, WI 53213-0526

TERMS NET 30 DAYS
1 1/2% PER MONTH (18% PER ANNUM) WIL
BE CHARGED ON ALL INVOICES PAST DUE

CLIENT

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

SERVICE LOCATION

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
318840	12/01/02	154555	COMMERCIAL MONTHLY	142	350.00	0.00	350.00

CONTACT: **BOB**

PHONE # 414-453-4790

PO #

WEEKLY SERV. ON FRIDAYS: ASI INSPECTED ACCT. LOG BOOK, MSDS SHEETS
& LABLES IN BOB'S OFFICE. INTERIOR & EXTERIOR RODENT CONTROL.
LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO
SERVICE & MAINTAIN THE

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL #CODE#	AMOUNT USED	CONCEN- TRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
				12-20-02 OK			
				Spinnaker			
10013	12 gal	.06	-	Interior backboards	SPT	<1000 FT	Red floor beetles

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH E ___ FLYING INSECTS I ___ SANITATION M ___ STRUCTURE
B ☒ STORED PRODUCT INSECTS F ___ RODENTS J ___ HARBORAGES N ___ EXTERNAL ENVIRONMENT
C ___ ANTS G ___ BIRDS K ___ VEGETATION O ___ STORAGE
D ___ WOOD DESTROYING INSECTS H ___ MISC INSECTS L ___ INACCESSIBLE AREAS P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

(B) Treated back boards in production room
today to control and prevent red
floor beetles

THANK you!

SEE ADDENDUM ☐

<i>Brad Schuchman</i>	139	12-20-2	AM 8:00	PM 12:00	<input checked="" type="checkbox"/> <i>Spinnaker</i>
TECHNICIAN SIGNATURE	TECH#	DATE	IN	OUT	CLIENT SIGNATURE
LICENSE # 95- <i>008173</i>	*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT				
WHITE LOCATION COPY	BLUE BRANCH	YELLOW CORP	GREEN PAYMENT COPY	PINK CLIENT INVOICE	

INVOICE



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MILWAUKEE, WI 53213-0526

TERMS NET 30 DAYS
1 1/2% PER MONTH (18% PER ANNUM) WIL-
BE CHARGED ON ALL INVOICES PAST DUE

CLIENT

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

SERVICE LOCATION

CRESTWOOD BAKERY
1710 S 108TH STREET
MILWAUKEE, WI 53214

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
38841	12/15/02	154555	COMMERCIAL MONTHLY	142	350.00	0.00	350.00

CONTACT: BOB PHONE # 414-453-4790 PO #
WEEKLY SERV. ON FRIDAYS: ASI INSPECTED ACCT. LOG BOOK, MSDS SHEETS
& LABELS IN BOB'S OFFICE. INTERIOR & EXTERIOR RODENT CONTROL.
LEAVE LOG REPORT & PINK INVOICE ONLY! FLY CONTROL ONCE A MONTH TO
SERVICE & MAINTAIN THE

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCEN- TRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
6013	12941	.06	-	Interior box boards	SPT	2000 FT	Red flow beetles

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80 COMMON OR BRAND NAME MANUFACTURER EPA REG # PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ☐ COCKROACH E ☐ FLYING INSECTS I ☐ SANITATION M ☐ STRUCTURE
B ☒ STORED PRODUCT INSECTS F ☐ RODENTS J ☐ HARBORAGES N ☐ EXTERNAL ENVIRONMENT
C ☐ ANTS G ☐ BIRDS K ☐ VEGETATION O ☐ STORAGE
D ☐ WOOD DESTROYING INSECTS H ☐ MISC INSECTS L ☐ INACCESSIBLE AREAS P ☐ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

(B) Treated all box boards in production
room & frosting room & dry store goods
to control and prevent red flow
beetles

THANK YOU!

SEE ADDENDUM ☐

Bruce Schoening 139 12-27-2 AM 7:00 AM 11:00 X M. Photo
TECHNICIAN SIGNATURE TECH# DATE IN OUT CLIENT SIGNATURE

LICENSE # 95- 008173 *NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY BLUE BRANCH YELLOW CORP GREEN PAYMENT COPY PINK CLIENT INVOICE

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CLIENT

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TERMS: 1 1/2% PER MONTH (18% PER ANNUM) WILL
 BE CHARGED ON ALL INVOICES PAST DUE

SERVICE LOCATION

SENTRY LIQUOR
 2308 W ST. PAUL AVE
 WAUKESHA, WI 53186

SENTRY LIQUOR 7001
 2308 W ST. PAUL AVE
 WAUKESHA, WI 53186

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
33595	10-15-02	106286	COMMERCIAL MONTHLY	136	50.00	0.00	50.00

CONTACT

PETE LUX

PHONE #

262-896-3648

PO #

GENERAL PEST CONTROL
 FEE PER MONTH

SERVICE & MATERIAL APPLICATION RECORD

10/24	1st	0.00%	Treated	SPT	N/A	Low Ants

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS*INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS**

A ___ COCKROACH	E ___ FLYING INSECTS	I ___ SANITATION	M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS	F ___ RODENTS	J ___ HARBORAGES	N ___ EXTERNAL ENVIRONMENT
C ___ ANTS	G ___ BIRDS	K ___ VEGETATION	O ___ STORAGE
D ___ WOOD DESTROYING INSECTS	H ___ MISC INSECTS	L ___ INACCESSIBLE AREAS	P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

Treated for cockroaching insects

Inspected rodent equipment
 → No activity at this time

SEE ADDENDUM ☐

TECHNICIAN SIGNATURE

TECH#

DATE

IN

OUT

CLIENT SIGNATURE

LICENSE # 95-061228

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE, BRANCH

YELLOW CORP

GREEN PAYMENT COPY

PINK, CLIENT INVOICE

WIL-KIL 'PEST' CONTROL

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CLIENT

Celebrating
73rd

PO. BOX 13528
MILWAUKEE, WI 53213-0528

TERMS: NET 30 DAYS
1.72% PER MONTH (18% PER ANNUM)
BE CHARGED ON ALL INVOICES EAST

SERVICE LOCATION

SENTRY LIQUOR
2308 W ST. PAUL AVE
WAUKESHA, WI 53186

SENTRY LIQUOR 7001
2308 W ST. - PAUL AVE
WAUKESHA, WI 53180

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
305505		106286	COMMERCIAL MONTHLY	136	50.00	0.00	50.00
CONTACT: PETE LUX			PHONE # 262-896-3648		PO #		
GENERAL PEST CONTROL							
ONCE PER MONTH							

SERVICE & MATERIAL APPLICATION RECORD

[illegible]

OTHER MATERIAL USE (NOT LISTED ON BAG CONTS THIS FORM)

COMMON OR BRAND NAME	MANUFACTURER	EPA REG. #	PRECAUTION CODE(S)
*SEE REVERSE SIDE FOR MATERIAL LIST CODE #'S & PRECAUTIONS			

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A	COCKROACH	F	FLYING INSECTS	J	SANITATION	M	STRUCTURE
B	STORED PRODUCT INSECTS	G	RODENTS	K	HARBORAGES	N	EXTERNAL ENVIRONMENT
C	PLANTS	H	BIRDS	L	VEGETATION	O	STORAGE
D	WOOD DESTROYING INSECTS	I	MISC. INSECTS	P	INACCESSIBLE AREAS	Q	OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

Treated for mice - crawling insects.

Inspected contents again.

→ No activity at this time.

SEE ADDENDUM.

TECHNICIAN SIGNATURE <i>Charles E. [illegible]</i>	TECH# 1471	DATE 11/2/02	IN AM 9:40 PM 4:30	OUT AM 9:40 PM 4:30	CLIENT SIGNATURE <i>X London [illegible]</i>
LICENSE # 06-001258	NOTE: SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT				
WHITE: LOCATION COPY	BLUE: BRANCH	YELLOW: CORP	GREEN: PAYMENT COPY	PINK: CLIENT INV	

INVOICE

F 02

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MILWAUKEE, WI 53213-0526TERMS NET 30 DAYS
1 1/2% PER MONTH (18% PER ANNUM) WILL
BE CHARGED ON ALL INVOICES PAST DUE

CLIENT

SERVICE LOCATION

SENTRY LIQUOR
2308 W ST. PAUL AVE
WAUKESHA, WI 53186SENTRY LIQUOR 7001
2308 W ST. PAUL AVE
WAUKESHA, WI 53188

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
276890	09-17-02	106286	COMMERCIAL MONTHLY	136	50.00	0.00	50.00

CONTACT
PETE LUX
GENERAL PEST CONTROL
ONCE PER MONTH

PHONE # 262-896-3648

PO #

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE	AMOUNT USED	CONCEN- TRATION	LOCATION	DATE	TIME	BY
6024-181	0.0670		Interior		SPT	N/A

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

*SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH	E ___ FLYING INSECTS	I ___ SANITATION	M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS	F ___ RODENTS	J ___ HARBORAGES	N ___ EXTERNAL ENVIRONMENT
C ___ ANTS	G ___ BIRDS	K ___ VEGETATION	O ___ STORAGE
D ___ WOOD DESTROYING INSECTS	H ___ MISC INSECTS	L ___ INACCESSIBLE AREAS	P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

Treated for misc. crawling insects

Inspected rodent traps

→ No activity at this time

SEE ADDENDUM ☐

TECHNICIAN SIGNATURE

TECH#

DATE

IN

OUT

CLIENT SIGNATURE

LICENSE # 95-061228

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

PINK. CLIENT INVOICE

TOTAL P 02

INVOICE / I.P.M. LOG REPORT



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PO BOX 13526
MILWAUKEE WI 53213-0526

TERMS NET 30 DAYS

1 1/2% PER MONTH (18% PER ANNUM) W/BE CHARGED ON ALL INVOICES PAST DL

CLIENT

SENTRY LIQUOR
2308 W ST. PAUL AVE
WAUKESHA, WI 53186

SERVICE LOCATION

SENTRY LIQUOR 7001
2308 W ST. PAUL AVE
WAUKESHA, WI 53186

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
350441	03/05/03	106286	COMMERCIAL MONTHLY	13E	50.00	0.00	50.00

CONTACT PHONE # PO #
PETE LUX 262-896-0648
GENERAL PEST CONTROL
ONCE PER MONTH

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCENTRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
				None used			

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

#80 COMMON OR BRAND NAME MANUFACTURER EPA REG # PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH E ___ FLYING INSECTS I ___ SANITATION M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS F ___ RODENTS J ___ HARBORAGES N ___ EXTERNAL ENVIRONMENT
C ___ ANTS G ___ BIRDS K ___ VEGETATION O ___ STORAGE
D ___ WOOD DESTROYING INSECTS H ___ MISC INSECTS L ___ INACCESSIBLE AREAS P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

Inspected / odent equip
→ No activity found

Inspected & found no insect activity

SEE ADDENDUM ☐

TECHNICIAN SIGNATURE 147 3-27-03 9 April 28 2003 X
TECH# DATE IN OUT CLIENT SIGNATURE

LICENSE # 95-061228

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

PINK CLIENT INVOICE



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PO BOX 13526
MILWAUKEE, WI 53213-0526

TERMS NET 30 DAYS

1 1/2% PER MONTH (18% PER ANNUM) WILL
BE CHARGED ON ALL INVOICES PAST DUE

CLIENT

SENTRY LIQUOR
2308 W ST. PAUL AVE
WAUKESHA, WI 53186

SERVICE LOCATION

SENTRY LIQUOR 7001
2308 W ST. PAUL AVE
WAUKESHA, WI 53188

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
362039	04/01/03	106286	COMMERCIAL MONTHLY	136	50.00	0.00	50.00

CONTACT: PETE LUX
GENERAL PEST CONTROL
ONCE PER MONTH

PHONE # 262-896-3648

PO #

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCEN- TRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
6002	1pt.	0.05%		Interior	SPT	N/A	Bay Ants

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

☐ OVER 5 GALLONS WAS MIXED AT THIS SITE

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH	E ___ FLYING INSECTS	I ___ SANITATION	M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS	F ___ RODENTS	J ___ HARBORAGES	N ___ EXTERNAL ENVIRONMENT
C ___ ANTS	G ___ BIRDS	K ___ VEGETATION	O ___ STORAGE
D ___ WOOD DESTROYING INSECTS	H ___ MISC INSECTS	L ___ INACCESSIBLE AREAS	P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

Treated for mice crawling insects

Inspected rodent equip → No activity

Thank You!

SEE ADDENDUM ☐

<i>Charles</i> TECHNICIAN NAME	147 TECH#	42403 DATE	AM 12:52 IN	AM 1:03 OUT	<i>X</i> CLIENT SIGNATURE
-----------------------------------	--------------	---------------	-------------------	-------------------	------------------------------

LICENSE # 95-061228

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

PINK CLIENT INVOICE

1-2640
835-8203
825-1000
438-8420
782 7811
359-4568



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CLIENT

WILKINSON CO
1637 E. JAMES STREET
LACROSSE, WI 54601

INVOICE

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Since 1929

REMIT TO

WIL-KIL PEST CONTROL
PO BOX 13526
MILWAUKEE, WI 53213-0526

TERMS. NET 30 DAYS
1 1/2% PER MONTH (18% PER ANNU)
BE CHARGED ON ALL INVOICES PAS

SERVICE LOCATION

AMERICAN WAREHOUSE
2820 COMMERCE ST.
LACROSSE, WI 54602

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
346000	02/09/03	165445	Interior Rodent Lant	407	90.00	0.00	90.

CONTACT: PHAIN HAEF: PHONE # 608-779-3560 PO #
WICE, WARE, LANTS. SILVER FISH, LENTIFED.
SPIDERS & FLYING INSECTS EXTRA. INTERIOR RODENT CONTROL WKLY.
IN A 1ST RODENT CONTROL 2X MONTHLY

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCENTRATION	LOT #	LOCATION(S) OF APPLICATIONS (Structure, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET P (OR PES)
				None Used			

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

☐ OVER 5 GALLONS WAS MIXED AT THIS S

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

*SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH	E ___ FLYING INSECTS	I ___ SANITATION	M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS	F ___ RODENTS	J ___ HARBORAGES	N ___ EXTERNAL ENVIRONME
C ___ ANTS	G ___ BIRDS	K ___ VEGETATION	O ___ STORAGE
D ___ WOOD DESTROYING INSECTS	H ___ MISC INSECTS	L ___ INACCESSIBLE AREAS	P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

Cleared & dated all int stations, no activity found or reported, replaced dirty glue board where needed. No other activity found or reported.

Imm's (1) • (2) • (3) • total 0

SEE ADDENDUM ☐

Greg J. Peterson 426 20703 AM 7:00 PM 8:10 PM X
TECHNICIAN NAME TECH# DATE IN OUT CLIENT SIGNATURE

LICENSE # 95-026235

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE BRANCH

YELLOW CORP

GREEN PAYMENT COPY

PINK. CLIENT INVC

731 2640
 835-8203
 808 825-1000
 (414) 438-8420
 (808) 782 7811
 (715) 359-4588



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WIL-KIL PEST CONTROL
 PO BOX 13526
 MILWAUKEE, WI 53213-0526

TERMS. NET 30 DAYS

1 1/2% PER MONTH (18% PER ANNUM) W
 BE CHARGED ON ALL INVOICES PAST DU

CLIENT

FLEMING CO
 1637 S. JAMES STREET
 LA CROSSE, WI 54601

SERVICE LOCATION

AMERICAN WAREHOUSE
 2820 COMMERCE ST.
 LA CROSSE, WI 54602

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
359024	03/23/03	107440	Interior Rodent Cont	437	90.00	0.00	90.00

CONTACT Bryan Harris PHONE # 608-779-3561 PO #
 512, 512, LANE, 512, VER FISH, LENTREDEL.
 SPIDERS & FLYING INSECTS EXTRA. INTERIOR RODENT CONTROL WFLY.
 IN 8 1/2" RODENT CONTROL EX MONTHLY

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCEN- TRATION	LOT #	LOCATIONS OF APPLICATIONS (Structures, Sites, Or Areas Treated)	TECHNIQUE OF APPLICATION	NET BOX AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
				<i>None Used</i>			

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

☐ OVER 5 GALLONS WAS MIXED AT THIS SITE

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH E ___ FLYING INSECTS I ___ SANITATION M ___ STRUCTURE
 B ___ STORED PRODUCT INSECTS F ___ RODENTS J ___ HARBORAGES N ___ EXTERNAL ENVIRONMENT
 C ___ ANTS G ___ BIRDS K ___ VEGETATION O ___ STORAGE
 D ___ WOOD DESTROYING INSECTS H ___ MISC INSECTS L ___ INACCESSIBLE AREAS P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

*Deposited & dated & removed all just
 starting today. No Activity found or
 reported*

Item ① ② ③ total 0

SEE ADDENDUM ☐

TECHNICIAN NAME

TECH#

DATE

IN

OUT

CLIENT SIGNATURE

LICENSE # 95-

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

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(414) 438-8420
(808) 782 7811
(715) 359-4568



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PO BOX 13526
MILWAUKEE, WI 53213-0526

TERMS NET 30 DAYS

1 1/2% PER MONTH (18% PER ANNUM) W
BE CHARGED ON ALL INVOICES PAST DU

CLIENT

SERVICE LOCATION

FLORING CO
1537 E. JAMES STREET
LACROSSE, WI 54601

AMERICAN WAREHOUSE
7820 COMMERCE ST.
LACROSSE, WI 54602

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
359025	03/30/03	153445	Interior Rodent Cont	407	92.00	6.00	98.00

CONTACT: *Bruce Hef* PHONE # *608-795 2553* PO #
WIDE, HALL, LAMINATE, SILVER FISH, IDENTIFIED,
SPIDERS & FLYING INSECTS EXTRA INTERIOR RODENT CONTROL ONLY.
IN & EX. RODENT CONTROL & MURKIN

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCENTRATION	LOT #	LOCATION(S) OF APPLICATIONS (Structure, Site, Or Area Treated)	TECHNIQUE OF APPLICATION	APPROX. AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

☐ OVER 5 GALLONS WAS MIXED AT THIS SITE

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

***SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS**

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

A ___ COCKROACH E ___ FLYING INSECTS I ___ SANITATION M ___ STRUCTURE
B ___ STORED PRODUCT INSECTS F ___ RODENTS J ___ HARBORAGES N ___ EXTERNAL ENVIRONMENT
C ___ ANTS G ___ BIRDS K ___ VEGETATION O ___ STORAGE
D ___ WOOD DESTROYING INSECTS H ___ MISC INSECTS L ___ INACCESSIBLE AREAS P ___ OTHER

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

*Spilled from 57315, Cleaned & dated all
int stations, NO rodent activity found or
reported.*

Imm ① ② ③

SEE ADDENDUM ☐

Greg S Peterson 426 3-12-03 *AM 8:00* *AM 8:30* *X* *Steve Olsen*
TECHNICIAN NAME TECH# DATE IN OUT CLIENT SIGNATURE

LICENSE # 95- *026235*

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY

BLUE BRANCH

YELLOW CORP

GREEN. PAYMENT COPY

PINK. CLIENT INVOICE

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 (715) 835-8203
 (800) 825-1000
 (414) 438-8420
 (608) 782 7811
 (715) 358-4568



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CLIENT

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REMIT TO

WIL-KIL PEST CONTROL
 PO BOX 13526
 MILWAUKEE, WI 53213-0526

TERMS NET 30 DAYS
 1 1/2% PER MONTH (18% PER ANNUM)
 BE CHARGED ON ALL INVOICES PAST DUE

SERVICE LOCATION

AMERICAN WAREHOUSE
 2020 COMMERCE ST.
 LAKEWISSE, WI 54602

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
359026	03/02/03	159442	Exterior Rodent Cont	407	112.00	0.00	112.00

CONTACT: *BRUCE WATERS* PHONE # *503-775-3550* PO #
 WICE, WATERS, LENTZ, DILLON, HILL, LENTZ, DILLON,
 WIDEWELL & FLYING INSECT CONTROL, INTERIOR RODENT CONTROL WKLY.
 IN & EXT RODENT CONTROL 2X MONTHLY

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCENTRATION	LOT #	DESCRIPTION OF APPLICATIONS (Structure, Site, Or Area Treated)	TECHNIQUE OF APPLICATION	ACTUAL AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
				<i>None Used</i>			

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

☐ OVER 5 GALLONS WAS MIXED AT THIS SITE

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

*SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

- | | | | |
|-------------------------------|----------------------|--------------------------|----------------------------|
| A ___ COCKROACH | E ___ FLYING INSECTS | I ___ SANITATION | M ___ STRUCTURE |
| B ___ STORED PRODUCT INSECTS | F ___ RODENTS | J ___ HARBORAGES | N ___ EXTERNAL ENVIRONMENT |
| C ___ ANTS | G ___ BIRDS | K ___ VEGETATION | O ___ STORAGE |
| D ___ WOOD DESTROYING INSECTS | H ___ MISC INSECTS | L ___ INACCESSIBLE AREAS | P ___ OTHER |

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

*Ext equip snow & ice covered inaccessible
 Cleaned & oiled all int equip, repaired
 glue boards where needed no activity for
 or reported.*

Trms 1-2-3-4 total 0

SEE ADDENDUM ☐

Greg L. Peterson 426 3-5-03 AM 7:30 AM 8:15 PM *[Signature]*

TECHNICIAN NAME

TECH#

DATE

IN

OUT

CLIENT SIGNATURE

LICENSE # 95-026235

*NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE COPY

YELLOW COPY

YELLOW COPY

GREEN PAYMENT COPY

PINK CLIENT INVOICE

TON (202) 731-2640
 ALABAMA (205) 835-8203
 ARIZONA (602) 825-1000
 CALIFORNIA (414) 438-8420
 COLORADO (808) 782-7811
 CONNECTICUT (715) 359-4568



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 PO BOX 13526
 MILWAUKEE, WI 53213-0526

TERMS NET 30 DAYS

1 1/2% PER MONTH (18% PER ANNUM)
 BE CHARGED ON ALL INVOICES PAST 1

CLIENT

SERVICE LOCATION

FLEMING CO
 1637 E. JAMES STREET
 LACROSSE, WI 54601

AMERICAN WAREHOUSE
 2850 COMMERCE ST.
 LACROSSE, WI 54602

INVOICE NUMBER	SORT DATE	CLIENT NUMBER	TYPE OF SERVICE	ROUTE NUMBER	AMOUNT	SALES TAX	TOTAL
359027	03/16/04	165445	Exterior Rodent Cont	401	112.00	0.00	112.00

CONTACT: DAVID HAEF PHONE # 608-799-3566 PO #
 WIDE, RAIS, LANTS, SILVER FISH, CENILLES,
 SPIDERS & FLYING INSECTS EXTERIOR. INTERIOR RODENT CONTROL WKLY.
 IN & EXT RODENT CONTROL EX MONTHLY

SERVICE & MATERIAL APPLICATION RECORD

MATERIAL CODE#	AMOUNT USED	CONCENTRATION	LOT #	LOCATION(S) OF APPLICATION(S) (Structure, Spot Or Areas Treated)	TECHNIQUE OF APPLICATION	APPROX AREA OR VOLUME TREATED	TARGET PEST (OR PESTS)
				<i>None Used</i>			

OTHER MATERIAL USE (NOT LISTED ON BACK OF THIS FORM)

☐ OVER 5 GALLONS WAS MIXED AT THIS SITE

#80

COMMON OR BRAND NAME

MANUFACTURER

EPA REG #

PRECAUTION CODE(S)

*SEE REVERSE SIDE FOR MATERIAL LIST, CODE #'S & PRECAUTIONS

INTEGRATED PEST MANAGEMENT REPORTS & CONCERNS

- | | | | |
|-------------------------------|----------------------|--------------------------|----------------------------|
| A ___ COCKROACH | E ___ FLYING INSECTS | I ___ SANITATION | M ___ STRUCTURE |
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| C ___ ANTS | G ___ BIRDS | K ___ VEGETATION | O ___ STORAGE |
| D ___ WOOD DESTROYING INSECTS | H ___ MISC INSECTS | L ___ INACCESSIBLE AREAS | P ___ OTHER |

SERVICE REPORT SUMMARY (Detailed Explanations & Comments)

Cleaned & dated ext stations, no activity found or reported, Cleaned & dated all inter stations, no activity found or reported.

Term ① • ② • ③ •

SEE ADDENDUM ☐

Greg S. Peterson 426 3-19-03 AM 7:30 PM 8:30 PM X *Steve Coleman*

TECHNICIAN NAME TECH# DATE IN OUT CLIENT SIGNATURE

LICENSE # 95- 026235 *NOTE SEND GREEN COPY WITH YOUR PAYMENT TO INSURE PROPER CREDIT

WHITE LOCATION COPY BLUE. BRANCH YELLOW CORP GREEN PAYMENT COPY PINK. CLIENT INVOICE