CLAIM FORM

TAX EXEMPT TAX ID. No. > 14-6002563

SOLD TO COUNTY OF ALBANY, NEW YORK				LEAVE THESE SPACES BLANK RECEIVED FOR AUDIT AMOUNT		
CLAIMANT Bond	Schoeneck &	King PLLC	ORDER	EXTEN	SIONS	
			CLAIM APPROVED			
ADDRESS 22 Corp	porate vvoods i	3IVd., Ste. 501	SIGNED:	20 FOI	R \$	
OFFICE OR DEPARTM	ENT	CODE	DATE PAID	CIVEC	AUDITOR	
		-		CHECI		
.O. NO. QUANT	CHARLESTON BARRIED CONTRACTOR	RIPTION OF ITEMS OR WOL	COMPANY OF THE PROPERTY OF THE	UNIT PRICE	AMOUNT	
1	LI	ST INVOICE OR SALES SLIP NUMBER	S IF AVAILABLE			
- 1		w of Grant Disbursemen	ts		\$12,095.00	
1	Bill #	20004884		H		
1		2.2		is .	\$	
				8		
		ALDAI	NY COUNTY		s	
		ALDA	AL COOMI			
		MA	R 0 / 2024			
12		a	ITY'S DEELCE			
1		ALIOH	NEY'S OFFICE			
(2						
	, A.					
ims must be rendered in	DUPLICATE to her	d of department for which services or ma		TOTAL	\$ 12,095.00	
	Matthews	CERTIFICATE O	FCLAIMANT			
1,	Matthew Young) pe name of person certifying, whether			do hereby certify	
octually rendered, the of y of Albany as stated he	lisbursements actual erein; that no Feder	& King, PLLC (if individual, I ation) and that this claim is true and ally and necessarily made or the suppeal or State taxes for which the County CLAIMANTS to an individual for services rendered or	lies or equipment actually is exempt are included in	delivered and that the	consideration has passed to tified true and correct.	
for any reason other the must supply your Fed.	an reimbursement of Tax ID. No. or your S	expenses incurred on county business, you ocial Security No. in the space provided.	- Ojbar	CLAIMAN'		
	L TAX IDENTIFICAT SOCIAL SECURITY			arch 5, 2024 By		
by delivered, accepted, of	ices enumerated in counted and inspec	OVAL BY DEPARTMENT HEAD C this claim were actually rendered by ted by me and are satisfactory and of or equipment were necessary and have	OR OFFICER THROUGH the persons named; the di the quantity and quality a	H WHOM CLAIM OR sbursements made; or pecified in such claim:	the supplies or equipment v	
7	1.)			2	_	
3/1/	197			Head of Depar	rtment	
9/1/	/		CLAIM NO	Head of Depar	rtment	

Federal Tax ID

22 Corporate Woods Boulevard, Suite 501 Albany, New York 12211-2503

TEL: (518) 533-3000 FAX: (518) 533-3299

February 5, 2024

Bill Number: 20004884

Eugenia Condon, Esq. Albany County 112 State Street Albany, NY 12207

Total Legal Services:

\$12,095.00

Total Disbursements:

\$0.00

Total This Invoice:

\$12,095.00

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Albany, NY 12207

For Legal Services Rendered through 01/31/24.

Review of Grant Disbursements Client Matter # 111450.447932

<u>Date</u>	Init.	<u>Hours</u>	Description
01/08/24	MAY	1.00	
01/09/24	EAA	2.00	
	MAY	1.20	
01/10/24	EAA	1.30	
	MAY	0.70	

Page: 2

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Albany County

<u>Date</u>	Init.	<u>Hours</u>	Description
01/11/24	MAY	0.50	
01/12/24	EAA	2.10	
	MAY	0.70	
01/16/24	EAA	3.00	
	MAY	0.70	
01/17/24	EAA	3.00	
01/18/24	EAA	1.40	
	MAY	1.20	
01/19/24	EAA	2.10	
	MAY	0.70	

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Albany County

Date	Init.	<u>Hours</u>	<u>Description</u>	
01/20/24	EAA	1.00		
	MAY	0.70		
01/22/24	EAA	3.10		
	MAY	3.90		
01/23/24	EAA	2.90		
	MAY	1.90		
01/24/24	EAA	0.50		
2-2-3-	THE PARTY OF	0.00		

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February 5, 2024

Bill Number: 20004884

Albany County

<u>Date</u>	Init.	<u>Hours</u>	<u>Description</u>
	MAY	0.50	
01/25/24	MAY	0.50	
01/26/24	EAA	0.20	
	MAY	0.50	

Total Fees for Matter:

\$12,095.00

Matter Summary by Name	Hours	Rate	Total
M. A. Young	14.70	\$400.00	\$5,880.00
E. A. Ahlqvist	22.60	275.00_	6,215.00
Total	37.30		\$12,095.00

TOTAL FOR THIS MATTER

\$12,095.00

Federal Tax ID

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February 5, 2024

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Eugenia Condon, Esq. Albany County 112 State Street Albany, NY 12207

REMITTANCE ADVICE

Please return this page with your payment in US Funds to:

Bond, Schoeneck & King, PLLC

P.O. Box 11607

Syracuse, NY 13218

Client ID:

111450

Matter ID:

447932

Total Legal Services

\$12,095.00

Total Disbursements

0.00

Total for Bill Number: 20004884

\$12,095.00

Effective 6/01/22 - New Banking Information

Use the following instructions if you wish to send a wire or ACH payment of this bill:

ABA #: 021307559

Bank: Community Bank, N.A., 5790 Widewaters Parkway, DeWitt, NY 13214

Account #: 3250226184 Bond, Schoeneck & King, PLLC

Reference: Name and Account or Bill Number SWIFT #: COUYUS31 (for international wires only)