

VENDOR NAME <i>Capital Express Transportation</i>		VENDOR NUMBER	REMIT NUMBER
VENDOR ADDRESS <i>P.O. Box 107</i>		PAYMENT VOUCHER DANE COUNTY, WISCONSIN	
<i>Sun Prairie, WI 53590</i>			

VENDOR INVOICE NO.	VENDOR INVOICE DATE	DESCRIPTION OF ARTICLE, MATERIALS, OR SERVICES	TOTAL
48730	3/31/15	<i>March program # 4570 rides \$</i> <i>✓ 552 units x 21.11 ✓</i> <i>March program # 4571 rides</i> <i>✓ 281 285 ^{DA} units x 33.70 ✓</i> <i>March program # 11003 rides</i> <i>✓ 1017 units x 13.56 ✓</i> <i>March program # 11004 rides</i> <i>✓ 504 units x 23.96 ✓</i>	<i>11652.72 ✓</i> 9522.40 <i>DA</i> <i>9469.70 ✓</i> <i>13790.52 ✓</i> <i>12075.84 ✓</i> <hr/> <i>46988.78 ✓</i>

I hereby certify that the above itemized claim for *281 ¹⁰⁹ hours* is true and correct and no portion of the same has been paid.

CERTIFIED BY (Signature) *Bob Marcel*

TITLE *UP*

DATE *4/31/15*

Line No.	ORGANIZATION	OBJECT	PROJECT	PURCHASE ORDER NUMBER	LINE NO.	Full/Partial Payment	AMOUNT
01							
02							
03							
04							
05							
06							
07							
08							
09							
10							

TOTAL

The above is hereby approved for payment

COMMITTEE (IF REQUIRED)	FINANCE COMMITTEE	AGENCY (IF REQUIRED)
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Dane County Human Services

Monthly Client Service Report (610 Form)

version 4.3.3

Provider Name : Capitol Express Transportaion
 Address : P.O. Box 107 Sun Prairie, WI 53590
 Prepared by : Bob Brancel
 Telephone : 608-215-5939 Fax : 608-271-6151
 E-Mail : capexpress@gmail.com

Report For : Mar - 2015
 (Enter as mm / dd / yyyy)

Beginning Census : + Openings :
 - Closings : = Ending Census :

DCDHS IDENTIFYING INFORMATION (Requested from DCDHS Staff)

Provider Number : 6593 Program Number : 4570
 Data Entry Contact : Doug Hunt - Peter Zander Program Area : Transportation

Grand Total :
 Error Check ran on :

CONSUMER INFORMATION

OPENING INFORMATION

CLOSING INFORMATION

Data Row	CONSUMER INFORMATION		OPENING INFORMATION				CLOSING INFORMATION							
	New	Close	Client Name (Last, First M.I.)	Client Number	Units	Starting Date	Target Group	Client Characteristics			Closing Date	SPC End Reason	Income < \$15K (x)	Living Alone (x)
								1st	2nd	3rd				
1					9	02/17/2014	01	26			319			
2					18	06/15/2010	01	26			319			
3					20	08/04/2011	01	26			319			
4					16	06/14/2011	01	26			319			
5					42	06/23/2012	01	26			319			
6					36	09/25/2013	01	26			319			
7					42	10/27/2008	01	26			319			
8					16	06/03/2013	01	26			319			
9					20	06/03/2013	01	26			319			
10					15	07/12/2011	01	26			319			
11					28	09/01/2014	01	28			319			
12					0	08/12/2014	01	26			319			
13					0	03/05/2013	01	26			319			
14					41	09/01/2014	01	26			319			
15					0	04/01/2011	01	26			319			
16					0	06/14/2010	01	26			319			

17				21	06/03/2013	01	26			319				
18				0	06/01/2012	01	26			319				
19				0	04/04/2011	01	26			319				
20				5	08/31/2010	01	26			319				
21				17	07/23/2012	01	26			319				
22				20	06/01/2012	01	26			319				
23				42	09/01/2014	01	26			319				
24				18	05/01/2006	01	26			319				
25				21	09/01/2014	01	23			319				
26				21	08/12/2013	01	26			319				
27				38	05/01/2006	01	26			319				
28				34	05/01/2006	01	26			319				
29				12	07/30/2012	01	26			319				
30				0	08/07/2012	01	26			319				
31				0	07/01/2008	01	26			319				

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 Telephone : 608-215-5939 Fax : 608-271-6151
 E-Mail : capexpress@gmail.com

Report For : Mar - 2015
 (Enter as mm / dd / yyyy)

Beginning Census : 15 + Openings : 1
 - Closings : 0 = Ending Census : 16

DCDHS IDENTIFYING INFORMATION (Requested from DCDHS Staff)

Provider Number : 6593 Program Number : 4571
 Data Entry Contact : Doug Hunt - Peter Zander Program Area : Transportation

Grand Total : 281.00

Error Check ran on : 04/07/2015 4:25:32 PM

CONSUMER INFORMATION

OPENING INFORMATION

CLOSING INFORMATION

Data Row	CONSUMER INFORMATION		OPENING INFORMATION				CLOSING INFORMATION								
	New	Close	Client Name (Last, First M.I.)	Client Number	Units	Starting Date	Target Group	Client Characteristics			Diagnosis	Closing Date	SPC End Reason	Income < \$15K (x)	Living Alone (x)
								1st	2nd	3rd					
1					37	10/14/2013	01	26			319				
2					42	09/01/2014	01	23			319				
3					13	07/23/2014	01	23			319				
4					4	10/29/2013	01	26			319				
5					21	01/27/2014	01	26			319				
6					42	09/01/2014	01	26			319				
7					16	06/03/2013	01	26			319				
8					19	06/28/2010	01	26			319				
9					15	03/05/2013	01	26			319				
10	x				18	03/01/2015	01	26			319				
11					0	09/11/2012	01	26			319				
12					33	05/27/2014	01	26			319				
13					0	02/01/2013	01	26			319				
14					0	09/01/2014	01	34			319				
15					0	08/04/2014	01	26			319				
16					21	09/01/2014	01	26			319				

Total 281.00

Dane County Human Services

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Provider Name : Capitol Express
 Address : PO Box 107 Sun Prairie, WI 53590
 Prepared by : Bob Brancel
 Telephone : 608-215-5939 Fax : 608-271-6151
 E-Mail : capexpress@gmail.com

Report For : Mar - 2015
 (Enter as mm / dd / yyyy)

Beginning Census : 55 + Openings : 0
 - Closings : 0 = Ending Census : 55

DCDHS IDENTIFYING INFORMATION (Requested from DCDHS Staff)

Provider Number : 6593 Program Number : 11003
 Data Entry Contact : Doug Hunt - Peter Zander Program Area : Transportation

Grand Total : 1,017.00

Error Check ran on : 04/03/2015 12:35:31 PM

CONSUMER INFORMATION

OPENING INFORMATION

CLOSING INFORMATION

Data Row	CONSUMER INFORMATION		OPENING INFORMATION				CLOSING INFORMATION								
	New	Close	Client Name (Last, First M.I.)	Client Number	Units	Starting Date	Target Group	Client Characteristics			Diagnosis	Closing Date	SPC End Reason	Income < \$15K (x)	Living Alone (x)
								1st	2nd	3rd					
1					15	08/01/2013	01	25			319				
2					44	08/01/2013	01	28			319				
3					0	08/01/2013	31	03			307				
4					0	08/01/2013	01	28			319				
5					0	08/01/2013	31	03			307				
6					41	08/01/2013	01	25			319				
7					19	08/01/2013	01	26			319				
8					41	08/01/2013	01	23			319				
9					29	08/01/2013	01	28			319				
10					4	08/01/2013	01	28			319				
11					3	06/01/2014	01	28			319				
12					9	08/01/2013	01	28			319				
13					0	09/01/2014	01	26			319				
14					26	08/01/2013	01	28			319				
15					37	08/01/2013	01	28			319				
16					21	08/01/2013	01	26			319				

Total 289.00

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 Address : PO Box 107 Sun Prairie, WI 53590
 Prepared by : Bob Brancel
 Telephone : 608-215-5939 Fax : 608-271-6151
 E-Mail : capexpress@gmail.com

Report For : Mar - 2015
 (Enter as mm / dd / yyyy)

Beginning Census : 25 + Openings : 0
 - Closings : 0 = Ending Census : 25

DCDHS IDENTIFYING INFORMATION (Requested from DCDHS Staff)

Provider Number : 6593 Program Number : 11004
 Data Entry Contact : Doug Hunt - Peter Zander Program Area : Transportation

Grand Total : 504.00

Error Check ran on : 04/03/2015 12:38:38 PM

CONSUMER INFORMATION

OPENING INFORMATION

CLOSING INFORMATION

Data Row	CONSUMER INFORMATION		OPENING INFORMATION				CLOSING INFORMATION								
	New	Close	Client Name (Last, First M.I.)	Client Number	Units	Starting Date	Target Group	Client Characteristics			Diagnosis	Closing Date	SPC End Reason	Income < \$15K (x)	Living Alone (x)
								1st	2nd	3rd					
1					0	08/01/2013	01	23			319				
2					42	08/01/2013	01	28			319				
3					14	08/01/2013	01	26			319				
4					26	08/01/2013	01	23			319				
5					16	09/01/2014	01	26			319				
6					0	08/01/2013	01	26			319				
7					11	08/01/2013	01	26			319				
8					21	09/08/2014	01	23			319				
9					20	09/08/2014	01	23			319				
10					0	08/01/2013	01	28			319				
11					42	09/01/2014	01	26			319				
12					43	09/01/2014	01	26			319				
13					16	08/01/2013	01	28			319				
14					41	08/01/2013	01	26			319				
15					0	09/01/2014	01	34			319				
16					18	03/13/2014	01	26			319				

Total 310.00

17				39	08/01/2013	01	26			319				
18				12	09/01/2014	01	26			319				
19				0	08/01/2013	01	26			319				
20				42	09/01/2014	01	26			319				
21				14	08/01/2013	01	26			319				
22				42	08/01/2013	01	26			319				
23				11	08/01/2013	01	28			319				
24				34	08/01/2013	01	26			319				
25				0	09/01/2014	01	23			319				