

APPENDIX D-4
Beneficiary Eligible Mitigation Action Certification

BENEFICIARY ELIGIBLE MITIGATION ACTION CERTIFICATION

Beneficiary _____

Lead Agency Authorized to Act on Behalf of the Beneficiary _____
(Any authorized person with delegation of such authority to direct the Trustee delivered to the Trustee pursuant to a Delegation of Authority and Certificate of Incumbency)

Action Title:	
Beneficiary's Project ID:	
Funding Request No.	<i>(sequential)</i>
Request Type: (select one or more)	<input type="checkbox"/> Reimbursement <input type="checkbox"/> Advance <input type="checkbox"/> Other (specify): _____
Payment to be made to: (select one or more)	<input type="checkbox"/> Beneficiary <input type="checkbox"/> Other (specify): _____
Funding Request & Direction (Attachment A)	<input type="checkbox"/> Attached to this Certification <input type="checkbox"/> To be Provided Separately

SUMMARY

Eligible Mitigation Action <input type="checkbox"/> Appendix D-2 item (specify): _____ Action Type <input type="checkbox"/> Item 10 - DERA Option (5.2.12) (specify and attach DERA Proposal): _____
Explanation of how funding request fits into Beneficiary's Mitigation Plan (5.2.1):
Detailed Description of Mitigation Action Item Including Community and Air Quality Benefits (5.2.2):
Estimate of Anticipated NOx Reductions (5.2.3):
Identification of Governmental Entity Responsible for Reviewing and Auditing Expenditures of Eligible Mitigation Action Funds to Ensure Compliance with Applicable Law (5.2.7.1):
Describe how the Beneficiary will make documentation publicly available (5.2.7.2).
Describe any cost share requirement to be placed on each NOx source proposed to be mitigated (5.2.8).
Describe how the Beneficiary complied with subparagraph 4.2.8, related to notice to U.S. Government Agencies (5.2.9).

If applicable, describe how the mitigation action will mitigate the impacts of NOx emissions on communities that have historically borne a disproportionate share of the adverse impacts of such emissions (5.2.10).

ATTACHMENTS
(CHECK BOX IF ATTACHED)

- Attachment A** **Funding Request and Direction.**
- Attachment B** **Eligible Mitigation Action Management Plan Including Detailed Budget and Implementation and Expenditures Timeline (5.2.4).**
- Attachment C** **Detailed Plan for Reporting on Eligible Mitigation Action Implementation (5.2.11).**
- Attachment D** **Detailed cost estimates from selected or potential vendors for each proposed expenditure exceeding \$25,000 (5.2.6). [Attach only if project involves vendor expenditures exceeding \$25,000.]**
- Attachment E** **DERA Option (5.2.12). [Attach only if using DERA option.]**
- Attachment F** **Attachment specifying amount of requested funding to be debited against each beneficiary's allocation (5.2.13). [Attach only if this is a joint application involving multiple beneficiaries.]**

CERTIFICATIONS

By submitting this application, the Lead Agency makes the following certifications:

- 1. This application is submitted on behalf of Beneficiary _____, and the person executing this certification has authority to make this certification on behalf of the Lead Agency and Beneficiary, pursuant to the Certification for Beneficiary Status filed with the Court.**
- 2. Beneficiary requests and directs that the Trustee make the payments described in this application and Attachment A to this Form.**
- 3. This application contains all information and certifications required by Paragraph 5.2 of the Trust Agreement, and the Trustee may rely on this application, Attachment A, and related certifications in making disbursements of trust funds for the aforementioned Project ID.**
- 4. Any vendors were or will be selected in accordance with a jurisdiction's public contracting law as applicable. (5.2.5)**
- 5. Beneficiary will maintain and make publicly available all documentation submitted in**

support of this funding request and all records supporting all expenditures of eligible mitigation action funds subject to applicable laws governing the publication of confidential business information and personally identifiable information. (5.2.7.2)

DATED: 3/28/22

Brian Rodenburg

[NAME]

[TITLE]

Indiana Department of Environmental Management

[LEAD AGENCY]

for

State of Indiana

[BENEFICIARY]

Appendix D-4 Summary Details

Eligible Mitigation Action Type:

Category 1: Class 8 Trucks

Explanation of how funding request fits into Beneficiary's Mitigation Plan (5.2.1):

Indiana will generally fund all eligible mitigation action (EMA) types included in Appendix D-2 of the national consent decree. The Mission Statement and Overall Goals are described below:

In promoting the reduction of emissions of NO_x, the Indiana Volkswagen Environmental Mitigation Trust Fund Program will prioritize sustainable projects that are transformative, positively impacting the environment, enhancing the health and well-being of residents, and promoting Indiana's growing economy.

The Program will focus on technological change and advancement with resiliency and favoring use of domestic fuel, where possible.

The goals of the Indiana Volkswagen Mitigation Trust Program include:

- Improving air quality across Indiana through cost-effective NO_x emission reduction strategies
- Maximizing diesel emission reductions across Indiana, while considering various categories of sensitive populations as areas of specific focus
- Providing appropriate considerations to projects that have diesel emission reductions that go beyond just NO_x, including PM_{2.5}, hydrocarbons (HC), carbon monoxide (CO), and carbon dioxide (CO₂)
- Encouraging leveraging of project partner funds with VW Trust funds to further the reach of the Indiana program

Detailed Description of Mitigation Action Item Including Community and Air Quality Benefits (5.2.2):

This project is for the purchase, installation, operation and maintenance of two (2) 2020 model-year, or newer, U.S. EPA emission compliant compressed-natural-gas-powered refuse trucks to REPLACE two (2) of the Grantee's existing diesel-powered refuse trucks that will be used for the same purpose. The replacement vehicle(s) will be located and operated in and around Muncie, Indiana.

Compressed-natural-gas-powered trucks dramatically improve air quality and the quality of life conditions for drivers, technicians, and citizens in the areas of operation due to notably lower tailpipe emissions in addition to less noisy engine operations.

The lifetime estimated emission reductions of pollutants according to U.S. EPA's Diesel Emission Quantifier (DEQ) include 1.338 tons of nitrogen oxides (NO_x) and 0.002 tons of fine particulate matter (PM_{2.5}).

Estimate of Anticipated NO_x Reductions (5.2.3):

Over the lifetime of these trucks, U.S. EPA's DEQ model estimates this project will result in a NOx reduction of 1.338 tons.

Identification of Governmental Entity Responsible for Reviewing and Auditing Expenditures of Eligible Mitigation Action Funds to Ensure Compliance with Applicable Law (5.2.7.1):

Indiana Department of Environmental Management

Describe how the Beneficiary will make documentation publicly available (5.2.7.2):

In October of 2017, IDEM published a website with specific information on the national mitigation trust as well as the Indiana program. The website included an opportunity to sign up for automated updates to make sure interested parties were always kept apprised of any changes made to the program website. This web portal will be the location for all information related to the Indiana Volkswagen Mitigation Trust Program.

Describe any cost share requirement to be placed on each NOx source proposed to be mitigated (5.2.8):

Indiana will use Volkswagen Mitigation Trust funds to reimburse non-government-owned fleet and equipment owners at the levels specified in Appendix D-2 of the national mitigation trust. IDEM will also use Volkswagen Mitigation Trust funds to reimburse government-owned fleets and equipment at the same level as non-government owned fleet and equipment owners, as opposed to the full cost reimbursement permitted by Appendix D-2.

Specifically, for this project, the Indiana Volkswagen Mitigation Trust Program will cover up to 25% of the total project cost while the Grantee and/or other programs covers the remaining 75%.

Describe how the Beneficiary complied with subparagraph 4.2.8, related to notice to U.S. Government Agencies (5.2.9):

The Indiana Department of Environmental Management notified representatives as identified in Appendix D-2 of the national consent decree via email in March of 2018.

If applicable, describe how the mitigation action will mitigate the impacts of NOx emissions on communities that have historically borne a disproportionate share of the adverse impacts of such emissions (5.2.10):

Not applicable to this specific project.

Attachment B Details

Project Schedule and Milestones:

Indiana announces Round 2 – VW Onroad and Nonroad funding opportunity via online Request for Proposals (RFP)	March 3, 2020
Deadline for Round 2 – VW Onroad and Nonroad program applications	May 1, 2020
Indiana notifies applicants of award decisions	May 28, 2020
Funding Agreement between Indiana and Grantee is fully executed	October 8, 2020
Grantee project implementation	October 8, 2020 to December 31, 2021
Indiana reviews programmatic, financial, and vehicle scrappage materials for compliance with Appendix D-2 of the national consent decree	Ongoing
Indiana submits Appendix D-4 to Trustee to initiate payment to Grantee in accordance with Payee Contact and Wire Information form along with other supporting documentation	March 25, 2022
Indiana coordinates with Trustee on any questions or issues that arise related to the submitted Appendix D-4	March 25, 2022 to D-4 approval
Trustee responds to Indiana Appendix D-4	Within 60 days of submittal
Trustee disburses payment to Grantee	Within 15 days of Appendix D-4 approval

Project Budget:

Project Description	Indiana VW Mitigation Trust Grant Not to Exceed Total	Grantee Cost Share Not Less than Total	Project Total
The purchase, installation, operation and maintenance of two (2) 2020 model-year, or newer, U.S. EPA emission compliant compressed-natural-gas-powered refuse trucks that will REPLACE two (2) of the Grantee’s existing diesel-powered refuse trucks that will be used for the same purpose. The replacement vehicle(s) will be operated in and around Muncie, Indiana.	\$184,159.98	\$552,479.94	\$736,639.92
Percentage	25%	75%	100%

State of Indiana Total Trust Allocation:

1) State of Indiana's Total Trust Allocation	\$40,935,880.59
2) Obligated Awards from Previous D-4 Submittals	\$9,655,683.60
3) State of Indiana's Net Remaining Allocation Prior to this D-4 Submittal	\$31,280,196.99
4) Current D-4 Funding Request Total	\$184,159.98
5) State of Indiana's Remaining Allocation After this D-4 Submittal	\$31,096,037.01

Projected Allocation Totals per Project Type:

	Total per Category	Annually Based on Expected Project Reimbursements
Total Trust	\$40,935,880.59	NA
To EV (15%) over 3 years (2021 to 2023)	\$6,140,382.09	\$2,046,794.03
To Admin (3%) over 4 years (2020 to 2023)	\$1,228,076.42	\$307,019.11
To EMAs (82%) over 3 years (2020 to 2022)	\$33,567,422.08	\$11,189,140.69

Projected Trust Allocations:

	2020	2021	2022	2023
1) Anticipated Annual Project Funding Request to be paid through the Trust	\$11,189,140.69	\$13,235,934.72	\$13,235,934.72	\$2,046,794.03
2) Anticipated Annual Cost Share (Administrative Costs)	\$307,019.11	\$307,019.11	\$307,019.11	\$307,019.11
3) Anticipated Total Project Funding by Year (Line 1 + Line 2)	\$11,496,159.8	\$13,542,953.8	\$13,542,953.8	\$2,353,813.14
4) Cumulative Trustee Payments Made to Date Against Cumulative Approved Beneficiary Allocation	\$3,895,454.40	\$4,710,898.20	\$817,427.00	
5) Current Beneficiary Project Funding to be paid through the Trust (Line 1)	\$101,199.00	\$130,705.00	\$184,159.98	
6) Total Funding Allocated to Beneficiary, inclusive of Current Action by Year (Line 4 + Line 5)	\$3,996,653.40	\$4,841,603.20	\$1,001,586.98	
7) Beneficiary Share of Estimated Funds Remaining in Trust at Beginning of Year	\$40,935,880.59	\$36,939,227.19	\$32,097,623.99	
8) Net Beneficiary Funds Remaining in Trust, net of cumulative Beneficiary Funding Actions (Line 7 – Line 6)	\$36,939,227.19	\$32,097,623.99	\$31,096,037.01	

Attachment C Details

Detailed Plan for Reporting on Eligible Mitigation Action Implementation (5.2.11):

The Indiana Department of Environmental Management (IDEM) is committed to meet the reporting requirements as detailed in Subparagraph 5.3 of the Environmental Mitigation Trust Agreement for State Beneficiaries. Specifically, this subparagraph states:

“For each Eligible Mitigation Action, no later than six months after receiving its first disbursement of Trust Assets, and thereafter no later than January 30 (for the preceding six-month period of July 1 to December 31) and July 30 (for the preceding six-month period of January 1 to June 30) of each year, each Beneficiary shall submit to the Trustee a semiannual report describing the progress implementing each Eligible Mitigation Action during the six-month period leading up to the reporting date (including a summary of all costs expended on the Eligible Mitigation Action through the reporting date). Such reports shall include a complete description of the status (including actual or projected termination date), development, implementation, and any modification of each approved Eligible Mitigation Action. Beneficiaries may group multiple Eligible Mitigation Actions and multiple sub-beneficiaries into a single report. These reports shall be signed by an official with the authority to submit the report for the Beneficiary and must contain an attestation that the information is true and correct and that the submission is made under penalty of perjury. To the extent a Beneficiary avails itself of the DERA Option described in Appendix D-2, that Beneficiary may submit its DERA Quarterly Programmatic Reports in satisfaction of its obligations under this Paragraph as to those Eligible Mitigation Actions funded through the DERA Option. The Trustee shall post each semiannual report on the State Trust’s public-facing website upon receipt.”

IDEM will meet these obligations in coordination with our project partners. Project partners are obligated to provide IDEM the necessary information for reports to the Trustee through the Funding Agreements between IDEM and each project partner. This language states:

“4. Implementation and Reporting Requirements

A. The Grantee shall implement and complete the Project in accordance with **Attachment A** and the plans and specifications contained in its Funding Application. Modification of the Project shall require prior written approval from IDEM. If IDEM determines that the Grantee is not making adequate progress in implementation of the approved Project in accordance with **Attachment A**, IDEM may rescind the award.

B. The Grantee shall submit to IDEM written progress reports until the completion of the Project. These reports shall be submitted in accordance with the reporting schedule contained in **Attachment C** and shall contain such detail of progress or performance on the Project as is required under the terms of the Volkswagen Diesel Emissions Environmental Mitigation Trust. If additional documentation is required for IDEM to meet reporting obligations under the Volkswagen Diesel Emissions Environmental Mitigation Trust, IDEM may request such documentation as necessary at any time during the term of this Agreement.”

Attachment D Details

Detailed cost estimates from selected or potential vendors for each proposed expenditure exceeding \$25,000 (5.2.6):

Detailed in the following pages:



ONR2-017-VW

INVOICE NO.

FROM: Mr. Phil Reagon
Muncie Sanitation Department
2121 N. Martin Luther King Jr. Blvd.
Muncie, Indiana, 47303
Phone: 765-747-4865

TO: Mr. Shawn M. Seals
Senior Environmental Manager
Indiana Department of Environmental Management
Office of Air Quality-Mail Code 61-50
100 North Senate Avenue
Indianapolis, IN 46204-225

RE: ONR2-017-VW PROJECTY FUNDING AGREEMENT-CNG REFUSE TRUCK

AMOUNT DUE: \$184,159.98 FOR (2) 2020 REPLACEMENT CNG REFUSE TRUCKS

REMIT TO:

Bank: First Merchants Bank
ABA/Routing Number: [REDACTED]
Account Number [REDACTED]
Bank Phone Number: 765-747-1536
Name on Account: Muncie Sanitary District
Bank Address: 200 E. Jackson Ave.
Muncie, IN 47305



Remit To:
 BEST EQUIPMENT CO., INC
 5550 POINDEXER DR
 INDIANAPOLIS, IN 46235-

INVOICE

Page 1 of 2

Invoice Number: SI204906
 Invoice Date: 9/1/2021

PLEASE INSPECT PROMPTLY.
 ALL RETURNS SUBJECT TO A 25% RESTOCKING FEE & FREIGHT CHARGES
 NO RETURNS ON ELECTRICAL ITEMS.
 NO RETURNS AFTER 30 DAYS.
 ANY INVOICE PAID AFTER THE INVOICE DUE DATE IS SUBJECT TO A
 MONTHLY FINANCE CHARGE OF 1.5% (ANNUAL RATE OF 18%)
 3% HANDLING CHARGE WILL BE ADDED TO ALL CREDIT CARD SALES.

EXPERTS IN MUNICIPAL AND CONTRACTOR ENVIRONMENTAL SOLUTIONS SINCE 1917

Bill
 To: MUNCIE SANITATION DISTR.
 5150 KILGORE AVE
 SANITATION DEPARTMENT
 MUNCIE, IN 47304

Shp
 To: MUNCIE SANITATION DISTR.
 5150 KILGORE AVE
 SANITATION DEPARTMENT
 MUNCIE, IN 47304

Ship Via	DELIVERY	Customer ID	MUNSAN
Ship Date	9/1/2021	P.O. Number	
Due Date	9/1/2021	P.O. Date	10/20/2020
Terms	DUE UPON RECEIPT	Original Invoice No.	31708
		SalesPerson	SHANE LANGEMEIER IN-

Item/Description	Unit	Quantity	Unit Price	Total Price
LB-AU211271VN GARBAGE TRUCK ONE NEW 33 YD LABRIE AUTOMIZER RIGHT HAND SIDE LOADING BODY SERIAL # AU211271VN MOUNTED ON NEW 2022 AUTOCAR CHASSIS, MODEL ACX64 VIN # 5VCACLCE4NC235272	EACH	1	368,319.96	368,319.96

PER INTERNAL REVENUE CODE 4221 (A)(4)
 THIS SALE IS NOT SUBJECT TO FEDERAL
 EXCISE TAX & THIS INVOICE DOES NOT
 INCLUDE ANY FEDERAL EXCISE TAX.

SOURCEWELL CONTRACT # 091219-LEG
 SOURCEWELL MEMBERSHIP # 140929

LIABILITY OF THE GOODS/EQUIPMENT IN THIS
 SALES INVOICE TRANSFERS TO THE BUYER,
 ONCE EQUIPMENT IS DELIVERED/UNLOADED
 TO THE BUYER, AS ACKNOWLEDGED BY
 SIGNATURE OF THIS SALES INVOICE.

Continued on page 2....



Remit To:
 BEST EQUIPMENT CO., INC
 5550 POINDEXER DR
 INDIANAPOLIS, IN 46235-

INVOICE
 Page 2 of 2
 Invoice Number: S1204906
 Invoice Date: 9/1/2021

PLEASE INSPECT PROMPTLY.
 ALL RETURNS SUBJECT TO A 25% RESTOCKING FEE & FREIGHT CHARGES
 NO RETURNS ON ELECTRICAL ITEMS.
 NO RETURNS AFTER 30 DAYS.
 ANY INVOICE PAID AFTER THE INVOICE DUE DATE IS SUBJECT TO A
 MONTHLY FINANCE CHARGE OF 1.5% (ANNUAL RATE OF 18%)
 3% HANDLING CHARGE WILL BE ADDED TO ALL CREDIT CARD SALES.

EXPERTS IN MUNICIPAL AND CONTRACTOR ENVIRONMENTAL SOLUTIONS SINCE 1917

Bill
 To: MUNCIE SANITATION DISTR.
 5150 KILGORE AVE
 SANITATION DEPARTMENT
 MUNCIE, IN 47304

Ship
 To: MUNCIE SANITATION DISTR.
 5150 KILGORE AVE
 SANITATION DEPARTMENT
 MUNCIE, IN 47304

Ship Via DELIVERY
 Ship Date 9/1/2021
 Due Date 9/1/2021
 Terms DUE UPON RECEIPT

Customer ID MUNSAN
 P.O. Number
 P.O. Date 10/20/2020
 Original Invoice No. 31708
 SalesPerson SHANE LANGEMEIER IN-

Item/Description	Unit	Quantity	Unit Price	Total Price
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SIGNATURE _____ DATE _____

tbranson@msdeng.com for Toters

Amount Subject to Sales Tax USD 0
 Amount Exempt from Sales Tax 368,319.96

Subtotal: 368,319.96
 Invoice Discount: 0.00
 Tax: 0.00

Total USD: 368,319.96



Remit To:
 BEST EQUIPMENT CO., INC
 5550 POINDEXER DR
 INDIANAPOLIS, IN 46235-

INVOICE

Page 1 of 2

Invoice Number:

SI204939

Invoice Date:

9/7/2021

PLEASE INSPECT PROMPTLY.
 ALL RETURNS SUBJECT TO A 25% RESTOCKING FEE & FREIGHT CHARGES
 NO RETURNS ON ELECTRICAL ITEMS.
 NO RETURNS AFTER 30 DAYS.
 ANY INVOICE PAID AFTER THE INVOICE DUE DATE IS SUBJECT TO A
 MONTHLY FINANCE CHARGE OF 1.5% (ANNUAL RATE OF 18%)
 3% HANDLING CHARGE WILL BE ADDED TO ALL CREDIT CARD SALES.

EXPERTS IN MUNICIPAL AND CONTRACTOR ENVIRONMENTAL SOLUTIONS SINCE 1917

Bill

To: MUNCIE SANITATION DISTR.
 300 N. HIGH ST

 MUNCIE, IN 47305

Ship

To: MUNCIE SANITATION DISTR.
 300 N. HIGH ST.

 MUNCIE, IN 47305

Ship Via	UPS	Customer ID	MUNSAN
Ship Date	9/7/2021	P.O. Number	
Due Date	9/7/2021	P.O. Date	9/3/2021
Terms	DUE UPON RECEIPT	Original Invoice No.	32269
		SalesPerson	SHANE LANGEMEIER IN-

Item/Description	Unit	Quantity	Unit Price	Total Price
LB-AU21127IVA GARBAGE TRUCK ONE NEW 33 YD LABRIE AUTOMIZER RIGHT HAND SIDE LOADING BODY SERIAL # AU21127IVA MOUNTED ON NEW 2022 AUTOCAR CHASSIS, MODEL ACX64 VIN # 5VCACLCE2NC235271	EACH	1	368,319.96	368,319.96

SOURCEWELL CONTRACT # 091219-LEG
 SOURCEWELL MEMBERSHIP # 140929

PER INTERNAL REVENUE CODE 4221 (A)(4)
 THIS SALE IS NOT SUBJECT TO FEDERAL
 EXCISE TAX & THIS INVOICE DOES NOT
 INCLUDE ANY FEDERAL EXCISE TAX.

LIABILITY OF THE GOODS/EQUIPMENT IN THIS
 SALES INVOICE TRANSFERS TO THE BUYER,
 ONCE EQUIPMENT IS UNLOADED/DELIVERED
 TO THE BUYER, AS ACKNOWLEDGED BY
 SIGNATURE OF THIS SALES INVOICE.

Continued on page 2....



Remit To:
 BEST EQUIPMENT CO., INC
 5550 POINDEXER DR
 INDIANAPOLIS, IN 46235-

INVOICE

Page 2 of 2

Invoice Number:

SI204939

Invoice Date:

9/7/2021

PLEASE INSPECT PROMPTLY.
 ALL RETURNS SUBJECT TO A 25% RESTOCKING FEE & FREIGHT CHARGES
 NO RETURNS ON ELECTRICAL ITEMS.
 NO RETURNS AFTER 30 DAYS.
 ANY INVOICE PAID AFTER THE INVOICE DUE DATE IS SUBJECT TO A
 MONTHLY FINANCE CHARGE OF 1.5% (ANNUAL RATE OF 18%)
 3% HANDLING CHARGE WILL BE ADDED TO ALL CREDIT CARD SALES.

EXPERTS IN MUNICIPAL AND CONTRACTOR ENVIRONMENTAL SOLUTIONS SINCE 1917

Bill

To: MUNCIE SANITATION DISTR.
 300 N. HIGH ST

 MUNCIE, IN 47305

Ship

To: MUNCIE SANITATION DISTR.
 300 N. HIGH ST.

 MUNCIE, IN 47305

Ship Via UPS
 Ship Date 9/7/2021
 Due Date 9/7/2021
 Terms DUE UPON RECEIPT

Customer ID MUNSAN
 P.O. Number
 P.O. Date 9/3/2021
 Original Invoice No. 32269
 SalesPerson SHANE LANGEMEIER IN-

Item/Description	Unit	Quantity	Unit Price	Total Price
<i>[Signature]</i>				
SIGNATURE		9-7-21		
		DATE		

tbranson@msdeng.com for Toters

Amount Subject to Sales Tax USD 0
 Amount Exempt from Sales Tax 368,319.96

Subtotal: 368,319.96
 Invoice Discount: 0.00
 Tax: 0.00

Total USD: 368,319.96



City of Muncie, IN
300 North High Street
Muncie, Indiana 47305

VOID AFTER
90 DAYS

Vendor Number	Check Date	Check Number
4410	10/08/2021	244686

PAY One Hundred Ninety Thousand Nine Hundred Thirteen and 12/100 Dollars

\$190,913.12

TO THE BEST EQUIPMENT COMPANY, INC.
ORDER OF 5550 POINDEXTER DR.
INDIANAPOLIS, IN 46235-9041

First Kaschner
Bank, VA
200 E 75th St
Muncie, IN 47305

Controller

0000111211

DO NOT WRITE, STAMP OR ENDORSE BELOW THIS LINE

Pay to the Order of
First Third Bank
For Deposit Only
BEST EQUIPMENT CO INC
ENDORSE HERE

*

Restored Amount \$190,913.12
 Payee BEST EQUIPMENT COMPANY, INC.
 Remittance Address 5550 POINDEXTER DR.
 INDIANAPOLIS, IN 46235-9041
 Payment Message

275 - SANITATION 275-000111 - CASH - CORPORATE ACCOUNT \$4,719.69
 811 - SEWAGE GENERAL OPERATING 611-000111 - CASH - CORPORATE ACCOUNT \$186,197.43

✖

BEST EQUIPMENT COMPANY, INC.	SIDE-869	03/25/2021	\$1,597.59
BEST EQUIPMENT COMPANY, INC.	SIDE-4753	03/23/2021	\$2,128.40
BEST EQUIPMENT COMPANY, INC.	SIDE-4916	03/26/2021	\$1,197.33
BEST EQUIPMENT COMPANY, INC.	SIDE-4933	1301/20/21	\$92,906.05
BEST EQUIPMENT COMPANY, INC.	SIDE-4906	1301/07/21	\$92,906.05

1

50

1

50

* MSO wrote 1 check to cover 5 invoices
 This week.

POE

Past Messages

Today's Messages

◀ Past Message List

View Message Audit Log

◀ Prev

Next ▶

* Required fields

Outgoing Messages

Incoming Messages

Activity Summary

Inquiries & Reports

Past Messages

Account Balance

Statements

Error Description

Tools & Preferences

Administration

Status:	Completed	Message Type:	Standard
Create Time:	09/21/2021 12:23:29	Test/Prod:	Prod
IMAD:	20210921 QMGFT009 000642 09211229		
OMAD:	20210921 D2B74A1C 002156 09211229		

Basic Information

Sender ABA {3100}:	██████████ STAR FIN BK INDPLS
Receiver ABA {3400}:	██████████ FIFTH THIRD CINCI
Amount {2000}:	551,639.92
Type/Subtype Code {1510}:	1000 - Transfer of Funds
Business Function {3600}:	CTR - Customer Transfer
Sender Reference {3320}:	0921202114

Originator Information

Originator {5000}	
ID Code:	F - Fed Routing Number
Identifier:	██████████
Name:	STAR FINANCIAL BANK
Address:	ON BEHALF OF: MUNCIE SANITARY DISTRICT, 6230 BLUFFTON RD FORT WAYNE, IN 46809

Beneficiary Information

Beneficiary {4200}	
ID Code:	D - DDA Account Number
Identifier:	██████████
Name:	BEST EQUIPMENT COMPANY INC
Address:	5550 POINDEXTER DRIVE INDIANAPOLIS, IN 46235

Subject: Fwd: \$\$\$\$\$

Date: Wednesday, December 22, 2021 at 11:49:45 AM Central Standard Time

From: Shane Langemeier

To: Phil Reagon, Ryan Lisek

Hey Phil: See below. I think this should do it?

----- Forwarded message -----

From: Maria Dahlmann <mariadahlmann@bestequipmentco.com>

Date: Wed, Dec 22, 2021 at 12:44 PM

Subject: Fwd: \$\$\$\$\$

To: Shane Langemeier <shanelangemeier@bestequipmentco.com>, Jenny DeWitt <jdewitt@bestequipmentco.com>

----- Forwarded message -----

From: Maria Dahlmann <mariadahlmann@bestequipmentco.com>

Date: Wed, Sep 22, 2021 at 6:53 AM

Subject: \$\$\$\$\$

To: Debbie Cooper <debbiecooper@bestequipmentco.com>

9/21/2021 2:02 AM

Wire Transfer Incoming

TRN 210921-005669 092121
0921QMGF [REDACTED] FT03 ORG:
STAR FINANCIAL BANK ON BEHALF OF:
MUNCIE SANITARY DISTRICT, 6230
BLUFFTON RD FORT WAYNE, IN 46809
FROM: STAR FINANCIAL BANK
ABA [REDACTED] RFB: [REDACTED]

Profile picture



MARIA DAHLMANN

CFO
[BEST EQUIPMENT COMPANY, INC.](#)

5550 Poindexter Drive
Indianapolis, IN 46235

M 317.823.3052

P 317.823.3050 x103

E mariadahlmann@bestequipmentco.com



[Find us on map](#)

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FIFTH THIRD BANK

Deposits / Credits - continued

Date	Amount	Description
09/15		COSB COSB091421 V-00000210 BEST EQUIPMENT CO INC 091521
09/15		MERCHANT BANKCD PPI BANKCARD DEP DEPOSIT 49 [REDACTED] BEST EQUIPMENT CO INC 091521
09/16		FLYNN BROS CONTR EFT 11297 BEST EQUIPMENT 091621
09/16		MERCHANT BANKCD PPI BANKCARD DEP DEPOSIT [REDACTED] BEST EQUIPMENT CO INC 091621
09/16		DEPOSIT
09/16		DEPOSIT
09/16		INCOMING WIRE TRANS 091621
09/17		MERCHANT BANKCD PPI BANKCARD DEP DEPOSIT [REDACTED] BEST EQUIPMENT CO INC 091721
09/17		DEPOSIT
09/17		DEPOSIT
09/20		MERCHANT BANKCD PPI BANKCARD DEP DEPOSIT [REDACTED] BEST EQUIPMENT CO INC 092021
09/20		DEPOSIT
09/21		MERCHANT BANKCD PPI BANKCARD DEP DEPOSIT [REDACTED] BEST EQUIPMENT CO INC 092121
09/21		INCOMING WIRE TRANS 092121
09/21	551,639.92	INCOMING WIRE TRANS 092121
09/22		TOWN OF MUNSTER VENDOR PAY GEN0000001207 BEST EQUIPMENT CO INC 092221
09/22		COSB COSB092121 V-00000210 BEST EQUIPMENT CO INC 092221
09/22		MERCHANT BANKCD PPI BANKCARD DEP DEPOSIT [REDACTED] BEST EQUIPMENT CO INC 092221
09/22		DEPOSIT
09/22		DEPOSIT
09/23		DEPOSIT
09/24		CITY OF TIFFIN AP BEST EQUIPMENT CO INC 092421
09/24		CITYOFWINCHESTER GENERAL [REDACTED] BEST EQUIPMENT CO INC INVOICE SL204790 092421
09/24		EAGLE SERVICES BEST EQUIP BEST EQUIPMENT BEST EQUIPMENT COMPANY GENERAL TO BEST EQUIPMENT INVOICE #SI205142 092421
09/24		MERCHANT BANKCD PPI BANKCARD DEP DEPOSIT [REDACTED] BEST EQUIPMENT CO INC 092421
09/24		DEPOSIT
09/27		CITYOFROCKYRIVER CITY OF ROCKY RIVER VENDOR PAY 553 BEST EQUIPMENT COMPANY 092721
09/27		DEPOSIT
09/28		MERCHANT BANKCD PPI BANKCARD DEP DEPOSIT [REDACTED] BEST EQUIPMENT CO INC 092821
09/28		DEPOSIT
09/28		DEPOSIT
09/29		HEALTH EQUITY INC HealthEqui [REDACTED]
09/29		MERCHANT BANKCD PPI BANKCARD DEP DEPOSIT [REDACTED] BEST EQUIPMENT CO INC 092921
09/29		DEPOSIT
09/29		COSB COSB092821 V-00000210 BEST EQUIPMENT CO INC 092921
09/30		MERCHANT BANKCD PPI BANKCARD DEP DEPOSIT [REDACTED] BEST EQUIPMENT CO INC 093021
09/30		CITY OF HAMILTON ACH ITEM 31007 Best Equipment Company 093021

Daily Balance Summary

Date	Amount	Date	Amount	Date	Amount
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This is Best Equipment's INcoming Statement from Wire Transfer

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