

**EMPLOYEE HISTORY
EMPLOYEE HISTORY**

NAME Janelle Bowie
 POSITION Customer Service (1)(ctt)(VH/A(IV))
 HIRE DATE 9-14-98

SALARY / WAGE HISTORY:

| DATE | AMOUNT | REASON |
|----------|-----------------------|------------------|
| 9-14-98 | \$1000.00 / bi-weekly | Starting Salary |
| 10-21-99 | \$1200.00 | Raise |
| -00 | \$1400.00 | Raise |
| 9-20-01 | \$1550.00 / bi-weekly | Raise |
| 9-19-01 | \$100.00 | Home Depot Bonus |
| 12-28-01 | \$200.00 | Holiday Bonus |
| 8-7-02 | \$1750.00 / bi-weekly | Raise |
| 12-24-02 | \$200.00 | Holiday Bonus |
| 1-13-03 | \$1200.00 | 2003 |
| 11-20-02 | \$2,150.00 | Raise - 2003 |
| 12-24-03 | \$200.00 | Holiday Bonus |
| 11-24-04 | \$2,350.00 | Raise 2004 |
| 3-10-05 | \$29.50 / hr | Change to Hourly |
| 11-24-04 | \$400.00 | Holiday Bonus |

Janelle Wozniak - E0007 - 2005 Sales and Commission Report

| Janelle Wozniak - E0007 - 2005 Sales and Commission Report | | | | Report | | |
|--|---------------------|--------------|-----------|-----------|------------|-----------|
| For the Period From Dec 1, 2004 to Dec 31, 2004 | | | | | | |
| For the Period From Dec 1, 2004 to Dec 31, 2004 | | Earned | Date Paid | Amount | Amount | |
| E0007 | Marketing Incentive | 200,144.63 | 0.50% | 1,000.72 | 2/15/2005 | 1,000.00 |
| E0007 | Marketing Incentive | 200,144.63 | 0.50% | 1,000.72 | 2/15/2005 | 1,000.00 |
| For the Period From Jan 1, 2005 to Jan 30, 2005 | | | | | | |
| E0007 | Marketing Incentive | 164,804.65 | 0.50% | 824.02 | | |
| E0007 | Marketing Incentive | 164,804.65 | 0.50% | 824.02 | | |
| For the Period From Feb 1, 2005 to Feb 29, 2005 | | | | | | |
| E0007 | Marketing Incentive | 167,586.65 | 0.50% | 837.93 | 3/18/2005 | 1,000.00 |
| E0007 | Marketing Incentive | 167,586.65 | 0.50% | 837.93 | 3/18/2005 | 1,000.00 |
| For the Period From Mar 1, 2005 to Mar 31, 2005 | | | | | | |
| E0007 | Marketing Incentive | 108,363.49 | 0.50% | 541.82 | 3/24/2005 | 1,662.68 |
| E0007 | Marketing Incentive | 108,363.49 | 0.50% | 541.82 | 3/24/2005 | 1,662.68 |
| For the Period From Apr 1, 2005 to Apr 30, 2005 | | | | | | |
| E0007 | Marketing Incentive | 140,384.97 | 0.50% | 701.92 | 5/13/2005 | 541.82 |
| E0007 | Marketing Incentive | 140,384.97 | 0.50% | 701.92 | 5/13/2005 | 541.82 |
| For the Period From May 1, 2005 to May 31, 2005 | | | | | | |
| E0007 | Marketing Incentive | 165,924.34 | 0.50% | 829.61 | 6/16/2005 | 500.00 |
| E0007 | Marketing Incentive | 165,924.34 | 0.50% | 829.61 | 6/16/2005 | 500.00 |
| For the Period From Jun 1, 2005 to Jun 30, 2005 | | | | | | |
| E0007 | Marketing Incentive | 224,891.06 | 0.50% | 1,124.45 | 7/22/2005 | 500.00 |
| E0007 | Marketing Incentive | 224,891.06 | 0.50% | 1,124.45 | 7/22/2005 | 500.00 |
| For the Period From Jul 1, 2005 to Jul 31, 2005 | | | | | | |
| E0007 | Marketing Incentive | 171,031.73 | 0.50% | 855.16 | 8/19/2005 | 500.00 |
| E0007 | Marketing Incentive | 171,031.73 | 0.50% | 855.16 | 8/19/2005 | 500.00 |
| For the Period From Aug 1, 2005 to Aug 31, 2005 | | | | | | |
| E0007 | Marketing Incentive | 157,357.93 | 0.50% | 786.79 | 9/16/2005 | 500.00 |
| E0007 | Marketing Incentive | 157,357.93 | 0.50% | 786.79 | 9/16/2005 | 500.00 |
| For the Period From Sep 1, 2005 to Sep 30, 2005 | | | | | | |
| E0007 | Marketing Incentive | 158,367.17 | 0.50% | 791.84 | 10/14/2005 | 500.00 |
| E0007 | Marketing Incentive | 158,367.17 | 0.50% | 791.84 | 10/14/2005 | 500.00 |
| For the Period From Oct 1, 2005 to Oct 31, 2005 | | | | | | |
| E0007 | Marketing Incentive | 121,352.48 | 0.50% | 606.76 | 11/22/2005 | 500.00 |
| E0007 | Marketing Incentive | 121,352.48 | 0.50% | 606.76 | 11/22/2005 | 500.00 |
| For the Period From Nov 1, 2005 to Nov 30, 2005 | | | | | | |
| E0007 | Marketing Incentive | 297,271.02 | 0.50% | 1,486.36 | 12/9/2005 | 700.00 |
| E0007 | Marketing Incentive | 297,271.02 | 0.50% | 1,486.36 | 12/9/2005 | 700.00 |
| For the Period From December 1, 2005 to December 31, 2005 | | | | | | |
| E0007 | Marketing Incentive | 166,876.13 | 0.50% | 834.38 | 1/20/2006 | 816.82 |
| E0007 | Marketing Incentive | 166,876.13 | 0.50% | 834.38 | 1/20/2006 | 816.82 |
| For the Period From Jan 1, 2006 to Jan 30, 2006 | | | | | | |
| E0007 | Marketing Incentive | 160,391.16 | 0.50% | 801.96 | 2/17/2006 | 700.00 |
| E0007 | Marketing Incentive | 160,391.16 | 0.50% | 801.96 | 2/17/2006 | 700.00 |
| For the Period From Feb 1, 2006 to Feb 28, 2006 | | | | | | |
| E0007 | Marketing Incentive | 132,923.18 | 0.50% | 664.62 | 3/17/2006 | 766.57 |
| E0007 | Marketing Incentive | 132,923.18 | 0.50% | 664.62 | 3/17/2006 | 766.57 |
| TOTALS | | 2,537,578.59 | | 12,687.89 | | 12,687.89 |
| TOTALS | | 2,537,578.59 | | 12,687.89 | | 12,687.89 |

State Of Illinois
Department Of Employment Security

Work Search Record

Social Security No. [REDACTED] Client # igmm,er-1fb

Instructions: Please print this form and use the following tables to keep a record of all the employers and labor unions you contact while filing for unemployment insurance benefits. You are responsible for maintaining your work search information on the form provided by IDES on a weekly basis for up to 26 weeks. You will be required to produce your work search upon request. Failure to do so may result in denial of benefits. Be sure to bring your work search record with you if you come into the local office. If you need additional pages, contact your local office or duplicate this form.

Important Notice: Keep Your Work Search Records

A determination that you were actively seeking work during a week being claimed is subject to reconsideration (the determination may be reconsidered despite the fact that you have been paid benefits or returned to work). In order to preserve evidence that you were actively seeking work, do not discard your written work search record for any week being claimed until 53 weeks have passed from the end of that week. Further, if there is an appeal pending regarding your active work search for a week, keep your written work search record until there has been a final resolution of the matter.

Week Ending 2-4-10

| Contact Date | Name And Address Of Contact | Person Contacted | Method Of Contact | Type Of Work Sought | Results |
|--------------|-----------------------------|------------------|-------------------|--------------------------------|---------|
| 3/1 | Arrows Financial | HR | Jobs.com | A(R.f, | |
| 3/1 | F.E. Wheaton | C. Biesterfeld | Job.com | B; Ufr3 Admin. | |
| 3/1 | Arrows Fin. | HR | Job.com | CASH APPLICATIONS ASSOCIATE II | |
| 3/1 | Arrows Fin. | HR | Job.com | A/P Assoc. | |

Week Ending 2-11-10

| Contact Date | Name And Address Of Contact | Person Contacted | Method Of Contact | Type Of Work Sought | Results |
|--------------|-----------------------------|------------------|-------------------|---------------------------------|---------|
| 3/7 | Misericordia | Amy Boyle | Job.com | Asst. Dir. of Fin. | |
| 3/7 | Mortons | | Job.com | Assoc. Accountant | |
| 3/7 | Imc Holdings | A. Castino | Job.com | Corporate Controller | |
| 3/7 | Plote | HR Dept. | Job.com | Admin Asst. | Too FAR |
| 3/7 | UGN, Sme. | HR | Job.com | Corp. Sr. Buyer Commodity Buyer | |

Week Ending 3-18-06

| Contact ID# | Name And Address Of Contact | Person Contacted | Method Of Contact | Type Of Work Sought | Results |
|-------------|-----------------------------|------------------|-------------------|---------------------|---------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Week Ending 3-25-06

| Contact Date | Name And Address Of Contact | Person Contacted | Method Of Contact | Type Of Work Sought | Results |
|--------------|-----------------------------|------------------|-------------------|---------------------|---|
| 3/21 | Advanced Resources | Lisa McComb | in person | Admin / Ofc. mgr | Interview 4-6-06 - e-mailed revised resume |
| | | | | | |
| | | | | | |
| | | | | | |

Week Ending 4-1-06

| Contact Date | Name And Address Of Contact | Person Contacted | Method Of Contact | Type Of Work Sought | Results |
|--------------|-----------------------------|------------------|-------------------|------------------------|-----------|
| 3/28 | Sedona Staffing | Mary Ann Holm | in person | Admin. Asst. | Interview |
| 3/29 | YMCA - Chicago, IL | | Monster.com | Executive Assistant | |
| 3/28 | Unknown - Newspaper Ad | | Faxed Resume | Admin. Asst. | |
| 3/28 | Midwest Cage Co. | Dan Casey | mailed Resume | Office Mgr. | |
| 3/29 | Opportunity (Recruiter) | Zach themosen | Monster.com | Exec. Admin. Assistant | |

Week Ending 4-1-06 Contd.

| Contact Date | Name And Address Of Contact | Person Contacted | Method Of Contact | Type Of Work Sought | Results |
|--------------|--------------------------------|------------------|-------------------|-------------------------|------------------------|
| 3/29 | Glial Assoc. Ad. | Bette Pauls | Monster.com | Exec. Admin. Asst. | Res. filled |
| 3/29 | Advantage HR | | Monster.com | Admin. Asst. | 4-6-06 e-mail revision |
| 3/29 | Confidential (consulting firm) | | Monster.com | Admin. Asst. | |
| 3/29 | Confidential (consulting firm) | | Monster.com | Exec. Asst. + Ofc. Mgr. | |
| 3/29 | Conf. - Consulting | | Monster.com | Admin. Asst. | |
| 3/29 | Corbett Accel Healthcare | | Monster | Ex. Asst. | |
| 3/29 | SFA Sns. Co. | | Monster | Ad. Asst. | |

| | | | | | |
|------|---------------------------------|-------------|-------------|--|-------------------|
| 3/28 | Smart & Assoc. | | Monster.com | | |
| 3/30 | Midway Games | Carrie Gale | Monster | | Sec. Ad. |
| 3/30 | Weaver Boos | | Monster | | Admin. Asst. |
| 3/30 | Jolin Harris | | Monster | | Exec. Asst. |
| 3/30 | Confidential (Munee, IL) | | Monster | | Exec. (f. 3-) |
| 3/30 | Griffith Stals | | Monster | | EL. F. |
| 3/30 | Confidential US-IL - Chgo South | | Monster | | of 11200 Grev. J. |
| 3/30 | Five Star Recruiting | | Monster | | Admin. Asst 50 |

Week Ending

CGLE

| Contact Date | Name And Address Of Contact | Person Contacted | Method Of Contact | Type Of Work Sought | Results |
|--------------|-----------------------------|------------------|-------------------|---------------------|-----------------|
| 4/4 | Mattell Amer. Girl Chgo, IL | Place | online | Admin Asst | mailed revision |
| 4/3 | First Assoc. | Dick Wood | e-mail | Admin Asst. | |
| 4/3 | Richards Supply | Tim Miller | e-mail | Admin Asst | |
| 4/3 | R.W. Baird Co | HR | e-mail | Admin Asst | |
| 4/3 | Confidential (law firm) | HR | e-mail | Exec Asst | |

4-7-00

Week Ending

| Contact Date | Name And Address Of Contact | Person Contacted | Method Of Contact | Type Of Work Sought | Results |
|--------------|-----------------------------|------------------|-------------------|----------------------------|-----------|
| 4/4 | Midway Moving | Martha Enrby | e-mail | Sr. Admin Asst. | |
| 4/4 | Poly One Corp. | HR | e-mail | Cost. Sup. Rep | |
| 4/4 | Your Seasons | Michael Carrity | e-mail | Admin Asst. | Interview |
| 4/4 | Rush Univ. | Angela Mason | Web site | Admin Asst II | 4-7-00 |
| 4/4 | Ultra Cosmetics | Rebecca Mayes | E-mail | Admin Mgr. New Tinley Park | 12:00 |

Position filled
4-7-00
12:00

Week Ending @ C.A.E. W. . . .

↳ e-mailed revision location
4-6-00

| Contact Date | Name And Address Of Contact | Person Contacted | Method Of Contact | Type Of Work Sought | Results |
|--------------|-------------------------------|------------------|-------------------|---------------------|--------------------|
| 4/5 | CBS Radio | HR | US Mail | Exec. Asst. | Interview |
| 4/5 | (Recruiter) Addison Search | E. Kavanagh | e-mail | Exec. Asst. to CFO | |
| 4/5 | Xampico Bort. | HR | e-mail | Exec. Asst. | 4/6/00 e-mail sent |
| 4/6 | Wrigley Co. | HR | Web Site | Admin Asst. | Rec'd 4/6/00 |
| 4/6 | Brooklyn Hamilton | Lisa Klingler | e-mail/monster | Exec. Asst | Rec'd 4/6/00 |

Week Ending

4/6 Stage Products HR Mail Admin

| Contact Date | Name And Address Of Contact | Person Contacted | Method Of Contact | Type Of Work Sought | Results |
|--------------|-----------------------------|------------------|-------------------|---------------------|----------------|
| 4/6 | Climate Control | HR | US Mail | Admin | |
| 4/6 | Kelly Services | HR | Online Mail | Recruiter - Admin | |
| 4/6 | Banner - CBS | HR | online mail | Rec - Admin | |
| 4/6 | Future Environ. | HR | e-mail | Admin/ payroll | Star Newspaper |
| 4/6 | Phoenix Hire | HR | e-mail | Admin | |

R -

R -

R -

4/6 Phil (Jh-Jh)

4/6 Phil (V/E - G...)

HR

HR

e-mail

mail

Admin

f.k. f.m. (J)

STATE OF ILLINOIS
DEPARTMENT OF EMPLOYMENT SECURITY
WORK SEARCH RECORD

LIBRARY NO. [REDACTED]

CUIP ASSIGNATION [REDACTED]

Use the table below to keep a record of all the employers and labor unions you contact while in Unemployment Insurance benefits. You must mail data your work search information on the form provided by IDES on a weekly basis. You will be required to produce your work search report request. Failure to do so may result in denial of benefits. Be sure to bring your work search record with you if you are called to report into the local office. If you need additional pages to record your work search, contact your local office or duplicate this form.

IMPORTANT NOTICE: KEEPING YOUR WORK SEARCH RECORDS

A determination that you were actively seeking work during a week benefits claim is subject to reconsideration. (The determination may be reconsidered despite the fact that you have been paid benefits or returned to work since then.) In order to preserve evidence that you were actively seeking work, do not discard your written work search record for any week being claimed until 53 weeks have passed from the Illinois that week. Further, if there is an appeal pending regarding your active work search for a week, keep your written work search record until there has been a final resolution of the matter.

WEEK ENDING

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|---------------------------------------|------------------|-------------------|-------------------------------|----------------------|
| 1-20 | FA (FIS) #103-1113 | Alicia | Fax | Admin. Support | |
| 1-20 | FA #10811815 | HR | Fax | Legal Secretary | |
| 1-21 | Reinhart Food Serv. Univ. Park, IL | Several Managers | Job Fair | Office Mgr | Wait for Call |
| 1-16 | Classic Party Rentals Countryside, IL | | Career Builder | Operations Mgr. | |
| 1-22 | LaSalle Network Chgo, IL | Ryan Baril | Inter-View | Recruiter - various positions | Will keep me in file |

WEEK ENDING 1-31-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|-----------------------------------|------------------|-------------------|---------------------|-----------------|
| 1-2v | Nicos Yaw Naperville, IL | H- | Apply Online | Admin Asst | |
| 1-28 | Reinhart Food Serv Univ. Park, IL | H- | Follow up call | Office Mgr. | left VM msg |
| 1-17tp | AT & T | Ht2. | Apply Online | Customer Service | |
| 1-16 | Enterprise Rent A Car Mokena, IL | Nike Kracht | Phone | Sales Assoc. | Need each. Doc. |

WEEK ENDING 2-1-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|---------------------------------------|------------------|-------------------|---------------------|-----------|
| 2/2 | Classic Party Rentals Countryside | HR | Follow up call | Operations Mgr. | Left msg. |
| 2/2 | Name Not Listed Frankfort, IL | | FAX | Receptionist | |
| | Law Firm FAX # (815) 320-3201 | | | | |
| 2/2 | Monster.com - Sign up & submit resume | | | | |

SOCIAL SECURITY NO. _____

WENT'S SIGNATURE _____

M. - you

WEEK ENDING 2-1-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|------------------------------------|------------------|-------------------|---------------------|-----------------------|
| 2/13 | Eternally Green Frankfort, IL | Jim Webb | e-mail | Office Mgr | Results: K... kfte... |
| 2/13 | Home Club Small Oak Brook, IL | Apply Online | Career Builder | Admin. Asst. | |
| 2/13 | Name not listed Monee, IL | Apply Online | Account Temp | Book keeper | |
| 2/13 | Sedona Staffing Frankfort, IL | Mary Ann | Phone | Admin / Office | No office work |
| 2/13 | Teamwork Staffing Frankfort, IL | Lisa | Phone | Admin / Office | No office work |

WEEK ENDING 2-21-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|---------------------------------------|------------------|-------------------|---------------------|------------------|
| 2-16 | State Farm Tinley Park, IL | Tom Thorsen | Phone | Phone Sales | Sched. Interview |
| 2-18 | Troy Research Joliet, IL | Dir. of Admin | e-mail | Admin. Asst. | |
| 2-18 | Mattel - American Girl Chicago, IL | HR | Apply Online | Sales Associate | |
| 2-18 | Ideal Cards & Video Frankfort, IL | Rich (owner) | Phone | Cashier | Not Hiring |

WEEK ENDING 2-28-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|---------------------------------|------------------|---------------------|-----------------------|--------------|
| 2/26 | State Farm Tinley Park | Tom Thorsen | Interview | Sales | Not enough h |
| 2/23 | Petco Joliet, IL | Apply Online | Petco.com | Dist. Ctr. Supervisor | |
| 2/23 | PetSmart Tinley Park, IL | Cashier | Apply in person | Cashier | |
| 2/23 | Best Buy Tinley Park, IL | Manager | Apply in store | Sales Associate | |
| 2/23 | TGI Friday's Tinley Park, IL | manager | Apply at restaurant | Hostess or Waitress | Not Hiring |

WEEK ENDING 3-7-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|--|------------------|-------------------|---------------------|------------|
| 3/4 | Manpower Joliet, IL | Recept. | Phone Call | Admin Asst | NO |
| 3/6 | Flyer Delivery Service Exclusive Ads - Oak Lawn | Kevin Doran | Phone | Flyer Delivery | Rec'd Info |
| 3/6 | Walt's Frankfort | Service Desk | Apply in person | Cashier | |
| 3/6 | 7-11 Frankfort | Sue | Apply in person | Cashier | Not Hiring |

| | | | | | |
|------|-------------------------------------|-----------------|-----------|--------|---------------------|
| 2/11 | Elwood, IL | online | | | |
| 3/13 | Tastefully Simple Ind Contractor | Jessica Klein | In Person | Sales | too much \$ to star |
| 3/14 | Allstate Agent Frankfort, IL | Melissa Potempa | Phone | office | Left VM msg |

WEEK ENDING 3-21-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|---|------------------|-------------------|---------------------|------------------|
| 3-16 | Boston's Gour. Pizza Tinley Park, IL | Mgr. | Apply in person | Waitress | Not Hiring |
| 3-16 | Texas Roadhouse Tinley Park, IL | Mgr. | Phone | Waitress | Not Hiring |
| 3-16 | Denny's Mokena, IL | Mgr. | Apply in person | Waitress | only night shift |
| 3-16 | Peggar's Pizza Mokena, IL | Mgr. | Apply in person | Waitress | wait for call |
| 3-16 | Lume's Frankfort, IL | Owner / Mgr | Apply in person | Waitress | Not Hiring |

WEEK ENDING 3-28-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|-------------------------------------|------------------|-------------------|---------------------|---------------------------|
| 3/26 | Eternally Green Lawn Care - Eff. | Jim Webb | Rec'd letter | Office Mgr. | Results: Sched. Interview |
| 3/24 | Borders Books Matteson, IL | Cashier | Apply in person | Sales Associate | |
| 3/24 | State Farm Frankfort, IL | Elene Semanic | Phone | office | Not Hiring |
| 3/24 | State Farm Harlem Ave, Eff, IL | Mike Faulkner | Phone | office | Not hiring |
| 3/24 | Allstate Agent Frankfort, IL | Melissa Potempa | Phone | office | Left VM msg |

WEEK ENDING 4-4-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|-----------------------------------|------------------|-------------------|---------------------|---------|
| 4/1 | Bulde Marketing Homer Glen, IL | | e-mail | General Office | |
| 4/1 | Receptionist - Name not listed | | | urgent | |

WEEK ENDING 3-14-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|--|------------------|-------------------|-------------------------|----------------------|
| 3/11 | ? Name Not Listed Elossmoor, IL Nonprofit Charitable Organizations | Apply Online | via internet | Personnel Assistant | |
| 3/11 | UTI Integrated Logistics Elwood, IL | Apply Online | Monster | Customer Service Coord. | |
| 3/13 | Tastefully Simple Ind Contractor | Jessica Kleine | In Person | Sales | too much \$ to start |
| 3/14 | Allstate Agent Frankfort, IL | Melissa Potempa | Phone | office | Left VM msg |

WEEK ENDING 3-21-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|---|------------------|-------------------|---------------------|------------------|
| 3-16 | Boston's Gour. Pizza Tinley Park, IL | Mgr. | Apply in person | Waitress | Not Hiring |
| 3-16 | Texas Roadhouse Tinley Park, IL | Mgr. | Phone | Waitress | Not Hiring |
| 3-16 | Denny's Mokena, IL | Mgr. | Apply in person | Waitress | only night shift |
| 3-16 | Beggar's Pizza Mokena, IL | Mgr. | Apply in person | Waitress | wait for call |
| 3-16 | Lume's Frankfort, IL | Owner / Mgr | Apply in person | Waitress | Not Hiring |

WEEK ENDING 3-28-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|-------------------------------------|------------------|-------------------|---------------------|------------------|
| 3/26 | Eternally Green Lawn Care - Eff. | Jim Webb | Rec'd letter | Office Mgr. | Sched. Interview |
| 3/24 | Borders Books Matteson, IL | Cashier | Apply in person | Sales Associate | |
| 3/24 | State Farm Frankfort, IL | Ilene Semanic | Phone | office | Not Hiring |
| 3/24 | State Farm Harlem Ave, Eff., IL | Mike Faulkner | --- | office | Not hiring |
| 3/24 | Allstate Agent Frankfort, IL | Melissa Potempa | Office | Office | Left VM msg |

WEEK ENDING ~

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|---|------------------|-------------------|--------------------------|--|
| 4/1 | Buckle Marketing Homer Glen, IL | | e-mail | General office | |
| 4/1 | Receptionist - Name not listed Tinley/Oakland Area | | Fax | Urgent Care Receptionist | |
| 3/30 | Eternally Green Interview | Jim Webb | In Person | Office Mgr. | Scheduled "working" interview for 4/6/09 |

SOCIAL SECURITY NO. _____

CLIENT'S SIGNATURE [Signature]

WEEK ENDING 4-11-11

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|----------------------------------|----------------------|-------------------|-------------------------------|------------------|
| 4/9 | Auto Electric Chicago Hts, IL | HR Asme applicant | E-Mail | General Office @sigbit.net | |
| 4/10 | Eternally Green Frankfort, IL | Jim Webb | Working Interview | Off. Manager | Hired another c. |
| | | | | | |
| | | | | | |

WEEK ENDING ~

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|------------------------------------|------------------|-------------------|-------------------------|---------|
| 4/11 | FAX Alsip, IL 708-239-0117 | HR | FAX | Gen. Off. 1 office.. | |
| 4/11/10 | ? Mgmt. Company Orland Park, IL | HR | E-mail | Executive Secretary | |
| | | | | | |
| | | | | | |

WEEK ENDING ~ 4-07-11 CB

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|-----------------------------|------------------|-------------------|---------------------|---------|
| 4/11 | State Farm Monee, IL | Dan Mosca | E-Mail Resume | Admin Asst | |
| | | | | | |
| | | | | | |

WEEK ENDING 5-2-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|-----------------------------|------------------|-------------------|-----------------------|---------|
| 4/29 | TJX Lansing, IL | Apply online | Co. web site | Cost. Serv. Coord. | |
| | | | | | |
| | | | | | |

SOCIAL SECURITY NO. _____

CLIENT'S SIGNATURE Barry Lee, Jr.

Y.

WEEK ENDING 5-9-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|---------------------------------------|------------------|------------------------|----------------------|---------|
| 5/5 | Wachovia Corp. Joliet, IL | Apply Online | c.emp.ftl jctll.com | Client Associate | |
| 5/5 | Company Confidential Lisle, IL | Apply Online | Monster | Sales Admin Asst. | |
| 5/5 | Jeff Scott & Assoc. Midlothian, IL | Apply Online | Career builder | Admin. Asst. | |
| 5/5 | First Midwest Bank Joliet, IL | Apply online | Bank website | Customer Care Rep II | |

WEEK ENDING ~

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|------------------------------------|------------------|-------------------|---------------------|---------|
| 5/18 | Newspaper ad Frankfort Business | None listed | FAX | Office Assistant | |
| 5/11 | Company Confidential Joliet, IL | Apply Online | Monster | Executive Assistant | |
| | | | | | |
| | | | | | |

WEEK ENDING 5-22-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|---------------------------------------|------------------|-----------------------|---------------------|---------|
| 5/20 | Provena Health Mokena, IL | Apply online | Company web site | Reception | |
| 5/20 | US Army Homewood, IL | Apply online | Career builder | Legal Assistant | |
| 5/20 | US Army Chicago, IL | Apply online | Career builder | Admin. Support | |
| 5/20 | Intercon Solutions Chicago Hts, IL | HR | FAX (708) 750-4094 | Admin. Asst | |

WEEK ENDING 5-27-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|--|------------------|-------------------|--------------------------|---------------------|
| 5/27 | State Farm Monee, IL | Don Mosca | thQllt. | Admin Asst | Scheduled Interview |
| 5/27 | Argonne Nat'l Labs Chicago Facility | APPLY ONLINE | career builder | Big. J-KIM, n. Secretary | |
| 5/27 | Company Confidential South side | | Monster | HR Admin Asst | |

SOCIAL SECURITY NO. _____

CLIENT'S SIGNATURE *Janelle Sealmon*

WEEK ENDING 10-11-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|------------------------------------|------------------|-------------------|---------------------|---------------|
| 6/4 | State Farm Monee, IL | Dan Mosca | Interview | Admin Asst | wait for call |
| 6/5 | Provena Health Frankfort, IL | AWJ online | Provena web site | Admin. Asst. | |
| 6/5 | Mento Worldwide Log. Joliet, IL | | Career Builder | Admin. Asst | |
| | | | | | |
| | | | | | |

WEEK ENDING 6-13-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|---|------------------|-------------------|---------------------|------------------|
| 6/10 | State Farm Monee, IL | Dan Mosca | letter | Admin. Asst | |
| 6/11 | State Farm Monee, IL | Dan Mosca | Phone | Admin. Asst. | Hired someone @L |
| 6/11 | Rising Star Brand Foods Olympia Fields, IL | HR | Monster | Admin. Asst | |
| 6/11 | Dobler Group Midlothian, IL | HR | Monster | Admin. Asst. | |
| | | | | | |

WEEK ENDING 6-20-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|---------------------------------------|------------------|-------------------|---------------------|---------------|
| 6-18 | Union Elect. West. Beecher, IL | revised. HR | net e-mail | Admin. Asst. | |
| 6-19 | Cornell Companies Woodridge, IL | HR | Indeed.com | Admin. Asst | |
| 6-19 | Oyenne Nat'l Labs Joliet, IL | HR | Indeed.com | Admin. Asst. | not qualified |
| 6-19 | Company Confidential Woodridge, IL | HR | Indeed.com | Admin. Asst. | |
| | | | | | |

WEEK ENDING 6-22-09

| (X) CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|------------------|--|------------------|-------------------|----------------------|---------------|
| 6/25 | The First American Corp Winley Park, IL | HR | apply online | Escrow Receptionist | |
| 6/25 | Gregory Legal Mokena, IL | HR | Indeed.com | Affidavits Associate | too qualified |
| 6/25 | E.T. Paddock, Eng. Lockport, IL | | Monster | Admin. Asst | |
| | | | | | |

SOCIAL SECURITY NO. _____ CLIENT'S SIGNATURE ~ C. Of), L. J. - e cel WL C/C

WEEKENDING~

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|---------------------------------|------------------|-----------------------|---------------------|---------|
| 7-2 | Phonena Healer Frankfort, IL | | rt'l At. <:ll. C'm | Admin. Asst. | |
| | | | | | |
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WEEK E-1(NG) 7-11-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|--|--------------------------|--------------------|---------------------|------------------|
| 7-10 | Job Fair - Chicago HHS Library Stevens, IL | C. O. All- i - c: cpm | "J:f) ?eiSOO | Admin. | 705) 747 6600 |
| 7-10 | Company Confidential Oakland Park, IL | | mOth5fer | Admin Asst. | |
| 7-6 | Haraha Joliet, IL | | 11. xaly Online | Admin- Asst. | |
| | | | | | |
| | | | | | |

WEEK ENDING 7-18-09

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|-----------------------------|------------------|-------------------|---------------------|---------|
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WEEK ENDING -J - d D - 09-

| CONTACT DATE | NAME AND ADDRESS OF CONTACT | PERSON CONTACTED | METHOD OF CONTACT | TYPE OF WORK SOUGHT | RESULTS |
|--------------|-----------------------------|------------------|-------------------|---------------------|---------|
| | | | | | |
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Sign Out

Apply History [Last 30 days](#) | [Show all](#)

Don't lose track of the jobs you've applied for. You can review the status of your submitted resume, track your progress, and see how you compare with other candidates who applied for the same job.

Ace the interview and increase your job offers with help from InterviewSmarts!

Medical Assistant, Pom&Spine Institute, Joliet, IL, 60435 Delete

Applied with **Notes**

Resume Title: Medical Assistant 042110
 Cover Letter: N/A
 Date Applied: 6/16/2010
 Apply Status: Received
 Days Posted: 6/20/2010
 Questionnaire: N/A

500 characters remaining Update

Candidates for this job also applied for

Medical Assistant, University Head And Neck Associates, 60523 Delete

Applied with **Notes**

Resume Title: Medical Assistant (12100)
 Cover Letter: N/A
 Date Applied: 6/16/2010
 Apply Status: Received
 Days Posted: 7/18/2010
 Questionnaire: N/A

500 characters remaining Update

Candidates for this job also applied for

Medical Assistant, Primary Health Associates, Orland Park, IL, 60467 Delete

Applied with **Notes**

Resume Title: Medical Assistant 042110
 Cover Letter: Write cover letter!!
 Date Applied: 4/24/2010
 Apply Status: Received
 Days Posted: 5/27/2010
 Questionnaire: N/A

500 characters remaining Update

Candidates for this job also applied for

Nursing - Medical Assistant, Horizon Healthcare Associates, 60422 Delete

Applied with **Notes**

Resume Title: Medical Assistant 042110
 Cover Letter: Write cover letter!!
 Date Applied: 4/21/2010
 Apply Status: Received
 Days Posted: 4/26/2010
 Questionnaire: N/A

500 characters remaining Update

Candidates for this job also applied for

lC:a~

CBJobs

| Job Title | Location | Posted | Expires | Saved |
|--|----------|--------|---------|-----------|
| <u>Floater, Phlebotomy Service @ Quest Diagnostics</u> | | | Expired | 6/19/2010 |

Application History

| Job Title | Location | Posted | Expires | Appli9d |
|------------------------------------|------------------|-------------|-----------|-----------|
| <u>Certified Medical Assistant</u> | | | Expired | 6/19/2010 |
| <u>Medical Assistant</u> | | | Expired | 6/23/2010 |
| <u>Rap, Phlebotomy Services</u> | US-IL-Plainfield | 3 Weeks Ago | In 3 Days | 6/19/2010 |

CORRECTED (if checked)

| | | | | |
|--|-------------------------------|--|--|--|
| PAYER'S name, street address, city, state, ZIP code, and telephone no. UNLIMITED PERFORMANCE TRAINING, 666 Dundee Rd., #501 Northbrook, IL 60062-2733 (847) 562-0267 | | 1 Rents \$ | OMB No. 1545-0115 @016 Form 1099-MISC | Miscellaneous IT Income |
| PAYER'S Federal identification number [REDACTED] | | 2 Royalties \$ | 3 Other income \$ | |
| RECIPIENT'S name Janelle L Gedmin | | 4 Pellerin income tax withheld \$ | 5 Fishing boat proceeds \$ | Copy-B E For Recipient |
| RECIPIENT'S identification number [REDACTED] | | 6 Medical and health care payments \$ | 7 Nonemployee compensation \$ 1056.74 | |
| Street address (including apt. no.) 7618 W. Saint Francis Road Frankfort, IL | | 8 Substitute payments in lieu of dividends or interest \$ | 9 Payer made direct sales of \$5,000 or more of collectible works of art to a buyer (attach Form 1099-B) | This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported. |
| City, state, and ZIP code Frankfort, IL | | 10 Compensation or proceeds \$ | 11 [REDACTED] | |
| Account number (see instructions) 6 | | 12 [REDACTED] | 13 Excess golden parachute payments \$ | |
| 15a Section 409A deferrals \$ | 15b Section 409A income \$ | 14 Gross proceeds paid to an attorney \$ | 16 State tax withheld \$ | |
| 17 State or local income tax paid \$ | | 18 State or local income tax paid \$ | 19 State income tax \$ | |

Form 1099-MISC

MV1099M-B

(Keep for your records.)

Department of the Treasury - Internal Revenue Service

EX B

6976900000
& 176900000

SLM Financial Corporation Educational Loan Program

Date 08/29/2006

Borrower: ANELLE, JANE L. GEDMIN
Lender: SALLIE MAE BANK

In this disclosure the words "you" and "your" refer to Borrower and any Cosigner. Lender refers to SALLIE MAE BANK, located in the state of TN. The estimated funding date for this loan is 08/31/06. The estimated funding rate for this loan is 3.000% (the "margin"). The interest rate will be the Prime Rate as published in The Wall Street Journal plus 3.000%. The interest rate will in no way exceed the maximum rate allowed by law. The supplemental fee for this loan is 3.1224%.

Truth-in-Lending Disclosure

Form with fields for Annual Percentage Rate (11.743%), Finance Charge (\$33,250.00), and Loan Amount (\$24,500.00). Includes sections for Late Charge, Prepayment, Variable Rate, and Security.

Table with 3 columns: Number of Payments, Amount of Payments, and When Payments Are Due. Includes a summary row for Total Loan Amount (\$24,500.00).

Additional Fees: Payment Return Fee. Forbearance Fee: You may request, and the Lender, at the Lender's sole discretion, may grant you a forbearance under which you may defer regularly scheduled payments for up to 6 months.

By signing you acknowledge receipt of completed copy of this disclosure. Borrower's Signature: JANE L. GEDMIN. Cosigner's Signature: ANELLE, JANE L.

Sign and return to: SLM Financial Corporation • PO Box 470 • Madison, NJ 08053-0470 or SLM Financial Corporation • 10000 Commerce Parkway, Suite A • ML Laurel, NJ 08854



Department of the Treasury - Internal Revenue Service

Control No. 98-11111111

1 Wages, tips, other comp. 8439.46

2 Federal income tax withheld 988.17

3 Social security wages 8439.46

4 Social security tax withheld 523.27

5 Medicare wages and tips 8439.46

6 Medicare tax withheld 122.40

Employer's name, address, and ZIP code
Chicago Bath Systems LLC
7748 W. 99th Street
Hickory Hills, IL 60457

7 Social security tips 0.00

8 Allocated tips 0.00

9 Advance EIC payment 0.00

10 Dependent care benefits

11 Nonqualified plans

12a See inst. for box 12

12b

12c

12d

Employer identification number (EIN)

Employee's social security number

13 Stat. empl. plan

14 Other 14A S125 Dental 14.02

Employee's name, address, and ZIP code
Janelle L Gedmin
7618 W St Francis Road
Frankfort, IL 60423

2007

15 State wages, tips, etc. 8439.46

16 State income tax 253.18

17 Local wages, tips, etc.

18 Local income tax

19 Local wages, tips, etc.

20 Locality name

Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return

Department of the Treasury - Internal Revenue Service

7 W24UPP NTF 2571025 Copyright 2007 Greatland/Neico

Control No. 58-11111111

1 Wages, tips, other comp. 8439.46

2 Federal income tax withheld 988.17

3 Social security wages 8439.46

4 Social security tax withheld 523.27

5 Medicare wages and tips 8439.46

6 Medicare tax withheld 122.40

Employer's name, address, and ZIP code
Chicago Bath Systems LLC
7748 W. 99th Street
Hickory Hills, IL 60457

7 Social security tips 0.00

8 Allocated tips 0.00

9 Advance EIC payment 0.00

10 Dependent care benefits

11 Nonqualified plans

12a See inst. for box 12

12b

12c

12d

Employer identification number (EIN)

Employee's social security number

13 Stat. empl. plan

14 Other 14A S125 Dental 14.02

Employee's name, address, and ZIP code
Janelle L Gedmin
7618 W St Francis Road
Frankfort, IL 60423

2007

15 State wages, tips, etc. 8439.46

16 State income tax 253.18

17 Local wages, tips, etc.

18 Local income tax

19 Local wages, tips, etc.

20 Locality name

Copy 2 - To Be Filed With Employee's FEDERAL Tax Return

Department of the Treasury - Internal Revenue Service

Control No. 98-11111111

1 Wages, tips, other comp. 8439.46

2 Federal income tax withheld 988.17

3 Social security wages 8439.46

4 Social security tax withheld 523.27

5 Medicare wages and tips 8439.46

6 Medicare tax withheld 122.40

Employer's name, address, and ZIP code
Chicago Bath Systems LLC
7748 W. 99th Street
Hickory Hills, IL 60457

7 Social security tips 0.00

8 Allocated tips 0.00

9 Advance EIC payment 0.00

10 Dependent care benefits

11 Nonqualified plans

12a See inst. for box 12

12b

12c

12d

Employer identification number (EIN)

Employee's social security number

13 Stat. empl. plan

14 Other 14A S125 Dental 14.02

Employee's name, address, and ZIP code
Janelle L Gedmin
7618 W St Francis Road
Frankfort, IL 60423

2007

15 State wages, tips, etc. 8439.46

16 State income tax 253.18

17 Local wages, tips, etc.

18 Local income tax

19 Local wages, tips, etc.

20 Locality name

Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return

Department of the Treasury - Internal Revenue Service

Control No. 58-11111111

1 Wages, tips, other comp. 8439.46

2 Federal income tax withheld 988.17

3 Social security wages 8439.46

4 Social security tax withheld 523.27

5 Medicare wages and tips 8439.46

6 Medicare tax withheld 122.40

Employer's name, address, and ZIP code
Chicago Bath Systems LLC
7748 W. 99th Street
Hickory Hills, IL 60457

7 Social security tips 0.00

8 Allocated tips 0.00

9 Advance EIC payment 0.00

10 Dependent care benefits

11 Nonqualified plans

12a See inst. for box 12

12b

12c

12d

Employer identification number (EIN)

Employee's social security number

13 Stat. empl. plan

14 Other 14A S125 Dental 14.02

Employee's name, address, and ZIP code
Janelle L Gedmin
7618 W St Francis Road
Frankfort, IL 60423

2007

15 State wages, tips, etc. 8439.46

16 State income tax 253.18

17 Local wages, tips, etc.

18 Local income tax

19 Local wages, tips, etc.

20 Locality name

Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return

Department of the Treasury - Internal Revenue Service

RECORDED

| | | | | |
|---|--|---|--|--|
| FILER'S name, street address, city, state, ZIP code, and telephone number Joliet Junior College Joliet 1 Junior College J215 Soubolt Rd - 8938 Joliet, IL 60431-8938 | | Payments received for qualified tuition and related expenses \$897.00 | OMB No. 1545-1574 2@07 Form 1098-T | Tuition Statement |
| FILER'S identification no. 4222063 | STUDENT'S social security number [REDACTED] | Amounts billed for qualified tuition and related expenses [REDACTED] | 3 If this box is checked, one or more of the amounts has changed since the prior year. <input type="checkbox"/> | Copy B For Student |
| STUDENT'S name, street address, city, state, and ZIP code Janelle Gedmin Janelle Gedmin 7618 W SAINT FRANCIS RD Frankfort, IL 60423-6931 | | 4 Adjustments made for a prior year [REDACTED] | 5 Scholarships or grants \$200.00 | THIS IS IMPORTANT Tax information furnished to the Internal Revenue Service. |
| Service Provider/Accl No. (see instr.) 0222063 | 8 Checked if at least half-time student <input checked="" type="checkbox"/> | 6 Adjustments to scholarships or grants for a prior year [REDACTED] | 7 Check if information in box 5 is from a beginning scholarship student <input type="checkbox"/> | |
| Form 1098-T | | 9 Checked if a graduate student <input type="checkbox"/> | 10 Information to be reported <input type="checkbox"/> | |

(Keep for your records)

Instructions for Student

An eligible educational institution, such as a college or university, in which you are enrolled and an insurer who makes reimbursements or refunds of qualified tuition and related expenses to you, must furnish this statement to you. You, or the person who may claim you as a dependent, may be able to take either the tuition and fees deduction or claim an education credit on Form 1044 or Form 1040A for the qualified tuition and related expenses that were actually paid in 2007. Institutions may report either payments received in box 1 or amounts billed in box 2. The amount shown in box 1 or 2 may represent an amount other than the amount actually paid in 2007. Your institution must include its name, address, and information contact telephone number on this statement. It may also include contact information for a service provider. Although the service provider may be able to answer certain questions about the statement, do not contact them if you are having questions about the requirements for and how to figure any allowable tuition and fees deduction or education credit that you may claim. For more information about the deduction or credit, see Pub. 970, Tax Benefits for Education, Form 8863, Education Credits, and the Form 1040 or 1040A Instructions.

Box 1. Shows the total payments received from any source for qualified tuition and related expenses less any related reimbursements or refunds.

Box 2. Shows the total amounts billed for qualified tuition and related expenses less any related reductions or charges.

Box 3. Shows whether your institution changed its method of reporting for 2007. It has changed its method of reporting if the method of payments received or amounts billed used for 2007 is different than the reporting method used for 2006. You should be aware of this change to filing your allowable tuition and fees deduction or education credit. The deduction and the credits are allowable only for amounts actually paid during the year and not amounts reported as billed, but not paid, during the year.

Box 4. Shows any adjustments made for a prior year for qualified tuition and related expenses that were reported on the prior year Form 1098-T. This amount may reduce any allowable education credit you may claim for the prior year. See Form 1044 or Pub. 970 for more information.

Box 5. Shows the total of all scholarships or grants administered, and processed, by the eligible educational institution. The amount of scholarships or grants for the calendar year, including those not reported by the institution, may reduce the amount of any allowable tuition and fees deduction or the education credit you may claim for the year.

Box 6. Shows adjustments to scholarships or grants for a prior year. This amount may affect the amount of any allowable tuition and fees deduction or education credit you may claim for the prior year. See Pub. 970 for how to report these amounts.

Box 7. Shows whether the amount in box 1 or 2 includes amounts for an academic period beginning January-March 2008. See Pub. 970 for how to report these amounts.

Box 8. Shows whether you are considered to be carrying at least one-half the normal full-time work load for your course of study at the reporting institution. You are at least a half-time student for at least one academic period that begins during the year you meet one of the requirements for the Hope credit. You do not have to meet the work load requirement to qualify for the tuition and fees deduction or the lifetime learning credit.

Box 9. Shows whether you are considered to be enrolled in a program leading to a graduate degree, graduate-level certificate, or other recognized graduate-level educational credential. If you are enrolled in a graduate program, you are not eligible for the Hope credit, but you may qualify for the tuition and fees deduction or the lifetime learning credit.

Box 10. Shows the total amount of reimbursements or refunds of qualified tuition and related expenses made by an insurer. The amount of reimbursements or refunds for the calendar year may reduce the amount of any allowable tuition and fees deduction or education credit you may claim for the year.





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Student Class Schedule

06/21/2007 08:53AM 2007SM JOLIET JUNIOR COLLEGE Summer 2007
REGISTRATION STATEMENT
MAJOR: BU120 Business Management

| COURSE | TITLE/Instructor | LOC | START DATE | REFND DATE | DROP DATE | CREDIT | ST | NOTES |
|-------------|--|-----|------------|------------|------------|--------|----|-------|
| PSYC 101 50 | General Psychology O'Riordan Jennifer | MCD | 05/14/2007 | 05/15/2007 | 06/14/2007 | 3.00 | N | ← |
| ECON 103 51 | Prin Econ I-Macro Mustari Robert | MCD | 05/14/2007 | 05/15/2007 | 06/14/2007 | 3.00 | N | ← |
| SPCH 101 55 | Prin of Speech Carver Mary | MCD | 05/14/2007 | 05/15/2007 | 06/14/2007 | 3.00 | N | ← |
| SOC 101 91 | Intro to Sociology Worthington Jo Ann | MCD | 06/25/2007 | 06/26/2007 | 07/26/2007 | 3.00 | N | ← |

Current Term Balance: 0.00 Total Credits: 12.00

[Click to print Schedule](#)

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Joliet, IL 60431
815-220-8767
www.jjcbkstore.com

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NO RECEIPT / NO RETURN

21-Jun-07 4:07 PM
Clerk: drf Register
Trans. #10058530
* - Non Taxable Items

Gedmin, Janelle L
0722063
Customer ID: 0222063

0495005830 1 \$72.55
SOCIOLOGY IN OUR TIMES
Total Items: 1 Sub-Total: \$72.55
SALES TAX @ 7.750%: \$5.65
Total: \$78.60
Total Tendered: \$80.00
Change Due: (\$1.40)

Payment Via: \$80.00
CASH (\$1.40)
Change (Cash)

THANK YOU & COME AGAIN!
Order Your Books Online At
www.jjcbkstore.com

W-2 Wage and Tax Statement **2007** 011-20205 OMB No. 1545-0048

FORM Copy 1 - To Be Filed With Employer's FEDERAL INCOME TAX RETURN

Employee's name, address, and ZIP code
BIG SHOULDERS DIGITAL VIDEO PR
330B E WACKER DRIVE
CHICAGO, IL 60601

Employee's first name and initial Last name Suffix
JANELLE L. GEDMIN
7761B W SAINT FRANCIS RD
FRANKFORT, IL 60423

Employee's address and ZIP code
7761B W SAINT FRANCIS RD
FRANKFORT, IL 60423

| | | | |
|--|---------|-------------------------------------|---------|
| 1 Wages, tips, other compensation | 6241.13 | 2 Federal income tax withheld | 773.05 |
| 7 Social security wages | 6241.13 | 4 Social security tax withheld | 386.95 |
| 8 Allocated tips | | 6 Medicare wages and tips | 6241.13 |
| 9 Advance EIC payment | | 10 Dependent care benefits | |
| 11 Nonqualified plans | | 12a See instructions for box 12 | |
| 12b | | 12c | |
| 13 Statutory retirement third-party sick pay | | 14 Other | |
| b Employer identification number | | d Employee's social security number | |

15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name

W-2 Wage and Tax Statement **2007** 011-20205 OMB No. 1545-0048

FORM Copy C - For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B)

Employee's name, address, and ZIP code
BIG SHOULDERS DIGITAL VIDEO PR
303 E WACKER DRIVE
CHICAGO, IL 60601

Employee's first name and initial Last name Suffix
JANELLE L. GEDMIN
7618 W SAINT FRANCIS RD
FRANKFORT, IL 60423

Employee's address and ZIP code
7618 W SAINT FRANCIS RD
FRANKFORT, IL 60423

| | | | |
|--|---------|-------------------------------------|---------|
| 1 Wages, tips, other compensation | 6241.13 | 2 Federal income tax withheld | 773.05 |
| 7 Social security wages | 6241.13 | 4 Social security tax withheld | 386.95 |
| 8 Allocated tips | | 6 Medicare wages and tips | 6241.13 |
| 9 Advance EIC payment | | 10 Dependent care benefits | |
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| 12b | | 12c | |
| 13 Statutory retirement third-party sick pay | | 14 Other | |
| b Employer identification number | | d Employee's social security number | |

15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name

W-2 Wage and Tax Statement **2007** 011-20205 OMB No. 1545-0048

FORM Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return

Employee's name, address, and ZIP code
BIG SHOULDERS DIGITAL VIDEO PR
303 E WACKER DRIVE
CHICAGO, IL 60601

Employee's first name and initial Last name Suffix
JANELLE L. GEDMIN
7618 W SAINT FRANCIS RD
FRANKFORT, IL 60423

Employee's address and ZIP code
7618 W SAINT FRANCIS RD
FRANKFORT, IL 60423

| | | | |
|--|---------|-------------------------------------|---------|
| 1 Wages, tips, other compensation | 6241.13 | 2 Federal income tax withheld | 773.05 |
| 7 Social security wages | 6241.13 | 4 Social security tax withheld | 386.95 |
| 8 Allocated tips | | 6 Medicare wages and tips | 6241.13 |
| 9 Advance EIC payment | | 10 Dependent care benefits | |
| 11 Nonqualified plans | | 12a See instructions for box 12 | |
| 12b | | 12c | |
| 13 Statutory retirement third-party sick pay | | 14 Other | |
| b Employer identification number | | d Employee's social security number | |

15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name

W-2 Wage and Tax Statement **2007** 011-20205 OMB No. 1545-0048

FORM Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return

Employee's name, address, and ZIP code
BIG SHOULDERS DIGITAL VIDEO PR
303 E WACKER DRIVE
CHICAGO, IL 60601

Employee's first name and initial Last name Suffix
JANELLE L. GEDMIN
7618 W SAINT FRANCIS RD
FRANKFORT, IL 60423

Employee's address and ZIP code
7618 W SAINT FRANCIS RD
FRANKFORT, IL 60423

| | | | |
|--|---------|-------------------------------------|---------|
| 1 Wages, tips, other compensation | 6241.13 | 2 Federal income tax withheld | 773.05 |
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| 8 Allocated tips | | 6 Medicare wages and tips | 6241.13 |
| 9 Advance EIC payment | | 10 Dependent care benefits | |
| 11 Nonqualified plans | | 12a See instructions for box 12 | |
| 12b | | 12c | |
| 13 Statutory retirement third-party sick pay | | 14 Other | |
| b Employer identification number | | d Employee's social security number | |

15 State Employer's state ID number 16 State wages, tips, etc. 17 State income tax 18 Local wages, tips, etc. 19 Local income tax 20 Locality name

| | | | | | | | |
|---|--|---|--|---|--|--|--|
| Employer identification number (EIN) | | 20. Social Security Number for Box 12 | | 1 Wages, tips, other compensation 27657.41 | | 2 Federal income tax withheld 3506.36 | |
| Employer's name, address, and ZIP code | | 1b | | 3 Social security wages 27657.41 | | 4 Social security tax withheld 1714.76 | |
| ALLSTATE INSURANCE COMPANY HUMAN RESOURCE SUPPORT TEAM 51 WEST BIGGINS ROAD STE VGA SOUTH BARRINGTON, IL 60010 | | 1c | | 5 Medicare wages and tips | | 6 Medicare tax withheld 401.03 | |
| If Employee's name, address, and ZIP code: | | 1d | | 7 Social security tips 57.41 | | 8 Allocated tips | |
| JANELLE L. GEDMIN 7618 W SAINT FRANCIS RD FRANKFORT, IL 60423-6931 | | 1e | | 9 Advance EIC payment | | 10 Dependent care benefits | |
| State Employer's state ID number | | 16 State wages, tips, etc. | | 17 State income tax | | 18 Local wages, tips, etc. | |
| 18 | | 27657.41 | | 829.67 | | 19 Local income tax | |
| 20 Locality name | | 19 Advance EIC payment | | 10 Dependent care benefits | | 11 Nonqualified plans | |
| Form W-2 Wage and Tax Statement 2008 | | Department of the Treasury-Internal Revenue Service | | OMB # 1545-0008 | | Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return | |

| | | | | | | | |
|---|--|---|--|---|--|--|--|
| Employer identification number (EIN) | | 12a See instructions for Box 12 | | 1 Wages, tips, other compensation 27657.41 | | 2 Federal income tax withheld 3506.36 | |
| Employer's name, address, and ZIP code | | 12b | | 3 Social security wages 27657.41 | | 4 Social security tax withheld 1714.76 | |
| ALLSTATE INSURANCE COMPANY HUMAN RESOURCE SUPPORT TEAM 51 WEST BIGGINS ROAD STE VGA SOUTH BARRINGTON, IL 60010 | | 12c | | 5 Medicare wages and tips 27657.41 | | 6 Medicare tax withheld 401.03 | |
| If Employee's name, address, and ZIP code: | | 12d | | 7 Social security tips 57.41 | | 8 Allocated tips | |
| JANELLE L. GEDMIN 7618 W SAINT FRANCIS RD FRANKFORT, IL 60423-6931 | | 12e | | 9 Advance EIC payment | | 10 Dependent care benefits | |
| State Employer's state ID number | | 16 State wages, tips, etc. | | 17 State income tax | | 18 Local wages, tips, etc. | |
| 18 | | 27657.41 | | 829.67 | | 19 Local income tax | |
| 20 Locality name | | 19 Advance EIC payment | | 10 Dependent care benefits | | 11 Nonqualified plans | |
| Form W-2 Wage and Tax Statement 2008 | | Department of the Treasury-Internal Revenue Service | | OMB # 1545-0008 | | Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return | |

| | | | | | | | |
|---|--|---|--|---|--|---|--|
| Employer identification number (EIN) | | 12a See instructions for Box 12 | | 1 Wages, tips, other compensation 27657.41 | | 2 Federal income tax withheld 3506.36 | |
| Employer's name, address, and ZIP code | | 12b | | 3 Social security wages 27657.41 | | 4 Social security tax withheld 1714.76 | |
| ALLSTATE INSURANCE COMPANY HUMAN RESOURCE SUPPORT TEAM 51 WEST BIGGINS ROAD STE VGA SOUTH BARRINGTON, IL 60010 | | 12c | | 5 Medicare wages and tips 27657.41 | | 6 Medicare tax withheld 401.03 | |
| If Employee's name, address, and ZIP code: | | 12d | | 7 Social security tips 57.41 | | 8 Allocated tips | |
| JANEUE L. GEDMIN 7618 W SAINT FRANCIS RD FRANKFORT, IL 60423-6931 | | 12e | | 9 Advance EIC payment | | 10 Dependent care benefits | |
| State Employer's state ID number | | 16 State wages, tips, etc. | | 17 State income tax | | 18 Local wages, tips, etc. | |
| 18 | | 27657.41 | | 829.67 | | 19 Local income tax | |
| 20 Locality name | | 19 Advance EIC payment | | 10 Dependent care benefits | | 11 Nonqualified plans | |
| Form W-2 Wage and Tax Statement 2008 | | Department of the Treasury-Internal Revenue Service | | OMB # 1545-0008 | | Copy B - To Be Filed With Employee's FEDERAL Tax Return | |

| | | | | | | | |
|---|--|---|--|---|--|--|--|
| Employer identification number (EIN) | | 12a See instructions for Box 12 | | 1 Wages, tips, other compensation 27657.41 | | 2 Federal income tax withheld 3506.36 | |
| Employer's name, address, and ZIP code | | 12b | | 3 Social security wages 27657.41 | | 4 Social security tax withheld 1714.76 | |
| ALLSTATE INSURANCE COMPANY HUMAN RESOURCE SUPPORT TEAM 51 WEST BIGGINS ROAD STE VGA SOUTH BARRINGTON, IL 60010 | | 12c | | 5 Medicare wages and tips 27657.41 | | 6 Medicare tax withheld 401.03 | |
| If Employee's name, address, and ZIP code: | | 12d | | 7 Social security tips 57.41 | | 8 Allocated tips | |
| JANELLE L. GEDMIN 7618 W SAINT FRANCIS RD FRANKFORT, IL 60423-6931 | | 12e | | 9 Advance EIC payment | | 10 Dependent care benefits | |
| State Employer's state ID number | | 16 State wages, tips, etc. | | 17 State income tax | | 18 Local wages, tips, etc. | |
| 18 | | 27657.41 | | 829.67 | | 19 Local income tax | |
| 20 Locality name | | 19 Advance EIC payment | | 10 Dependent care benefits | | 11 Nonqualified plans | |
| Form W-2 Wage and Tax Statement 2008 | | Department of the Treasury-Internal Revenue Service | | OMB # 1545-0008 | | Copy C - For EMPLOYEE'S RECORDS (see Notice to Employee on back) | |

Ex G

b Employer identification number (EIN) [REDACTED]
 c Employer's name, address, and ZIP code [REDACTED]

**ALLSTATE INSURANCE COMPANY
 HUMAN RESOURCE SUPPORT TEAM
 51 WEST HIGGINS ROAD STE TGA
 SOUTH BARRINGTON, IL 60010**

12a See instructions for Box 12
 12b [REDACTED] .56
 12c [REDACTED]
 12d [REDACTED]
 12e [REDACTED]

1 Wages, tips, other compensation 2441.26
 2 Federal income tax withheld 308.04
 3 Social security wages 2441.26
 4 Social security tax withheld 151.36
 5 Medicare wages and tips 2441.26
 6 Medicare tax withheld 35.40
 7 Social security tips
 8 Allocated tips
 9 Advance EIC payment
 10 Dependent care benefits
 11 Nonqualified plans
 13

14 Other
 Copy 2 - To Be Filled With Employee's State, City, or Local Income Tax Return
 Employee's social security number [REDACTED]

15 State IL
 16 State wages, tips, etc. 2441.26
 17 State income tax 73.24
 18 Local wages, tips, etc.
 19 Local income tax
 20 Locality name

Form W-2 Wage and Tax Statement 2009 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy 2 - To Be Filled With Employee's State, City, or Local Income Tax Return

b Employer identification number (EIN) [REDACTED]
 c Employer's name, address, and ZIP code [REDACTED]

**ALLSTATE INSURANCE COMPANY
 HUMAN RESOURCE SUPPORT TEAM
 51 WEST HIGGINS ROAD STE TGA
 SOUTH BARRINGTON, IL 60010**

12a See instructions for Box 12
 12b [REDACTED] .56
 12c [REDACTED]
 12d [REDACTED]
 12e [REDACTED]

1 Wages, tips, other compensation 2441.26
 2 Federal income tax withheld 308.04
 3 Social security wages 2441.26
 4 Social security tax withheld 151.36
 5 Medicare wages and tips 2441.26
 6 Medicare tax withheld 35.40
 7 Social security tips
 8 Allocated tips
 9 Advance EIC payment
 10 Dependent care benefits
 11 Nonqualified plans
 13

14 Other
 Copy 2 - To Be Filled With Employee's State, City, or Local Income Tax Return
 Employee's social security number [REDACTED]

15 State IL
 16 State wages, tips, etc. 2441.26
 17 State income tax 73.24
 18 Local wages, tips, etc.
 19 Local income tax
 20 Locality name

Form W-2 Wage and Tax Statement 2009 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy 2 - To Be Filled With Employee's State, City, or Local Income Tax Return

b Employer identification number (EIN) [REDACTED]
 c Employer's name, address, and ZIP code [REDACTED]

**ALLSTATE INSURANCE COMPANY
 HUMAN RESOURCE SUPPORT TEAM
 51 WEST HIGGINS ROAD STE TGA
 SOUTH BARRINGTON, IL 60010**

12a See instructions for Box 12
 12b [REDACTED] .56
 12c [REDACTED]
 12d [REDACTED]
 12e [REDACTED]

1 Wages, tips, other compensation 2441.26
 2 Federal income tax withheld 308.04
 3 Social security wages 2441.26
 4 Social security tax withheld 151.36
 5 Medicare wages and tips 2441.26
 6 Medicare tax withheld 35.40
 7 Social security tips
 8 Allocated tips
 9 Advance EIC payment
 10 Dependent care benefits
 11 Nonqualified plans
 13

14 Other
 This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is posted and you fail to report it.
 Copy C - For EMPLOYEE'S RECORDS (see Notice to Employee on back)

15 State IL
 16 State wages, tips, etc. 2441.26
 17 State income tax 73.24
 18 Local wages, tips, etc.
 19 Local income tax
 20 Locality name

Form W-2 Wage and Tax Statement 2009 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy C - For EMPLOYEE'S RECORDS (see Notice to Employee on back)

b Employer identification number (EIN) [REDACTED]
 c Employer's name, address, and ZIP code [REDACTED]

**ALLSTATE INSURANCE COMPANY
 HUMAN RESOURCE SUPPORT TEAM
 51 WEST HIGGINS ROAD STE TGA
 SOUTH BARRINGTON, IL 60010**

12a See instructions for Box 12
 12b [REDACTED] .56
 12c [REDACTED]
 12d [REDACTED]
 12e [REDACTED]

1 Wages, tips, other compensation 2441.26
 2 Federal income tax withheld 308.04
 3 Social security wages 2441.26
 4 Social security tax withheld 151.36
 5 Medicare wages and tips 2441.26
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 7 Social security tips
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Form W-2 Wage and Tax Statement 2009 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy C - For EMPLOYEE'S RECORDS (see Notice to Employee on back)