

MOKENA SCHOOL DISTRICT 159

Date: 3/25/2025

Description of purchase: Slide-In Record Board for PE Dept.

Account #/Account Title: 10E004 1500 4100

School: MJH Administrator's Signature: 

☒ Pre-pay Check Request

updated: 09/2019

Team Fitz Graphics
11320 Mosteller Road
Cincinnati, OH 45241
+15137715112
accounts@teamfitzgraphics.com
www.TeamFitzGraphics.com

Invoice



BILL TO

Crystal Grimes
Mokena Junior High School
19815 Kirkstone Way
Mokena, IL 60448 USA

INVOICE #	DATE	TOTAL DUE	DUE DATE	TERMS	ENCLOSED
68905	03/25/2025	\$2,680.00	04/24/2025	Net 30	

CUSTOMER CONTACT

Crystal Grimes

DESCRIPTION	QTY	RATE	AMOUNT
Slide-In Record Board	1	2,325.00	2,325.00
Shipping	1	355.00	355.00
	1		0.00
Sales Tax calculated by AvaTax for 149862-V8 at Wed Mar 26 04:29:47 UTC 2025	1	0.00	0.00

Please email a copy of your tax-exempt form to
accounts@teamfitzgraphics.com.

SUBTOTAL	2,680.00
TOTAL	2,680.00
BALANCE DUE	\$2,680.00

REMIT TO:

Team Fitz Graphics
11320 Mosteller Rd
Cincinnati, OH 45241

Vendor Number: _____

PAYMENT REQUEST

and payment
Due 4/10/25

FY25

Write check to: Camp Manitouqua Date: 4/2/2025

Explanation of purchase: 5th grade outdoor ed

Invoice Number/Date: 145737

Amount of Check: \$381.25

Account Number: 10e003 1101 3200

Check Number: _____ (district office use)

Date of Check: _____ (district office use)

School: M.I.S. Administrator's Signature: 

SPECIAL INSTRUCTIONS:

☒ Return check to: _____

☐ Mail attachments with check _____

☐ Other: _____

Note: If Item(s) are charged to equipment Inventory Tag No.: _____

please fill out the following: Location: _____

Serial No.: _____

Attach backup/receipt(s) to this form. Keep copies for your records,
submit originals, with an administrator's signature, to District Office,
Attention: Peggy Ryan, Accounts Payable.

Booking Contract: OE | 05.14.25

Organization: Mokena Intermediate School**Address:** 11331 W 195th Street**City/State/Zip:** Mokena, IL 60448**Country:****Primary Contact:** Steven Roberts**Contact Email:** robertss@mokena159.org**Booking Type:** Outdoor Education/AZ**Booking Number:** 145737**Contact Phone:****Dates****Arrival Date:** May 14, 2025**Arrival Time:** 9:15 AM**Departure Date:** May 14, 2025**Departure Time:** 1:00 PM**Guests****Expected Number:** 50**Actual Number:****Reservations****Resources****Recreational Activities**

Name	From	To	Notes
Super Slides	May 14 9:15 AM	May 14 1:00 PM	
Slingshot Biathlon	May 14 9:15 AM	May 14 1:00 PM	

Nature Studies

Name	From	To	Notes
Archery	May 14 9:15 AM	May 14 1:00 PM	

Adventure Zone

Name	From	To	Notes
Initiatives	May 14 9:15 AM	May 14 1:00 PM	

Meals and Requests**Financial Information****Charges**

Date	Description	Quantity	Rate	Units	Total
May 22, 2024	Initiatives 1 @ \$12.25 x 50 Person	1	\$12.25	50	\$612.50
May 22, 2024	Archery 1 @ \$7.25 x 50 Person	1	\$7.25	50	\$362.50
May 22, 2024	Slingshot Biathlon 1 @ \$5.50 x 50 Person	1	\$5.50	50	\$275.00
May 22, 2024	Super Slides 1 @ \$5.50 x 50 Person	1	\$5.50	50	\$275.00

Total Fees:	\$ 1,525.00
Total Payments:	\$ 0.00
Postdated Payments:	\$ 0.00
Amount Due:	\$ 1,525.00

Deposit Schedule

Feb 28, 2025 - Contract Fee Due: \$381.25

Apr 14, 2025 - Deposit Due: \$381.25

May 29, 2025 - Final Amount Due: \$762.50

Terms of Agreement:

CONTRACT DEADLINE: Feb 28, 2025

Contracts not signed and received, by above deadline, will default to other parties wishing to book for the specified time period.

CHECKOUT TIMES

Check-out time for retreat groups is within 1 hour of the contracted end time. If your group is still on grounds after the given 1 hour grace period, your group will be subject to a \$50 late fee for each additional hour. Camp Manitouqua & Retreat Center reserves the right to request sleeping rooms/cabins be vacated at breakfast to accommodate housekeeping staff.

INVOICING POLICY FOR OUTDOOR EDUCATION, ADVENTURE ZONE AND CAMP CATERED MEALS:

The guest count that appears on this contract, 50, is the minimum guaranteed number of guests. The maximum number of guests you are allowed to bring is 62.0 which is 25% increase of your expected number. Changes outside of this range will necessitate a new contract. Contracts cannot be redrawn within 30 days of the event. The numbers you provide dictate the facilities we provide for your group. **It is very important that you provide regular updates to the Guest Services Coordinator in order to ensure we are matching you up with adequate staff and resources for your event based on the size of your group.** Ten (10) days prior to the event, the contact person will contact Camp Manitouqua & Retreat Center with the final count of people attending the event. This number must be equal to or greater than the minimum guaranteed. Manitouqua is not responsible for supplying lodging, facilities or resources to people who were not reported in a final count. Following the event, Manitouqua will invoice based on the final count provided or the actual number attending, whichever is greater. This total will include any charges for additional guests and other services or fees incurred.

INVOICING POLICY FOR OVERNIGHT & DAY MEETING RETREAT GROUPS:

Your contract includes requested facilities to match the Expected Number, 50, provided as well as the nature of the event. In order to best serve you, the guest, it is very important that you provide regular updates to the Guest Services Coordinator in order to ensure that we are matching you up with adequate and safe facilities for your event. Changes in the facilities requested will necessitate a new contract and is based on availability of facilities which cannot be guaranteed. Contracts cannot be redrawn within 30 days of the event. Ten (10) days prior to the event, the contact person will contact Camp Manitouqua & Retreat Center with a final count of people attending the event. Manitouqua is not responsible for supplying lodging, facilities or resources to people who were not reported in a final count. Following the event, Manitouqua will invoice based on the agreed upon facilities in this contract.

CANCELLATION POLICY

When it is necessary for a group to cancel and it is done at least 120 days before the scheduled event, deposits will be returned less a \$75 cancellation fee. If a group cancels within 120 days or less, all contract fees and deposits are non-refundable. When it is necessary for Camp Manitouqua & Retreat Center to cancel a retreat, a full refund of your contract fee and deposit will be given.

HEALTH STATEMENT

The retreat groups and guests will be responsible for providing their own group medical personnel, first aid, first aid supplies and emergency transportation.

INSURANCE STATEMENT

Accident insurance as provided by your sponsoring body or accident insurance carried by individual retreat guests is the primary coverage. We require the group to provide proof of this insurance. Contact your insurance company to ask for a Certificate of Insurance.

Statement of Conduct:

DURING YOUR STAY:

- Have plenty of adult supervision. We recommend a 1 to 8 ratio. An adult **MUST** be in each cabin.
- Guests staying in the Acorn, Birchwood, Oaks, and Overflow Cabins must bring bedding/sleeping bags and towels.
- All meals are the responsibility of the group leader.
- You may only use the facilities listed on this contract.
- Keep the noise level to a whisper outdoors after 11 p.m. This is the village appointed noise ordinance time.
- Please ask permission before you use the game room. Adults must be present to supervise the fun.

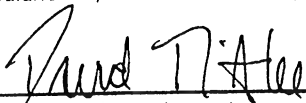
FACILITIES CARE:

- Please do not remove permanent furniture from any facilities or rooms provided to your group.
- Please be respectful of our facilities. There will be an additional charge for mistreatment and/or destruction of facilities.
- Food is not allowed in the cabins or Retreat Center bedrooms. Trash should be disposed of in containers provided.
- Keep your host informed of any breakage or malfunction of the facility
- Keep your vehicles in the designated parking lot. **Driving on the grounds is prohibited.**
- Use only designated fire pits and provided firewood. Please do not remove branches or chop down trees.
- Leave all alcohol, drugs, and pets at home. If a group is found with any of the above, we have the right to ask you to leave the premises and cancel your retreat without a refund.
- Enjoy the trees, flowers, and animals. Leave them right where they are so everyone may enjoy their beauty.
- Leave the fire extinguishers on the wall (unless there is a fire). There will be a charge for every discharged extinguisher.
- Be aware that the Acorn, Birchwood, Oaks and the Adult Retreat Center have a fire signaling system tied directly to the local Fire Protection District. This system is sensitive to candle burning and match lighting. A \$200.00 fee (or current Fire Department fee) will be charged if the system is set off intentionally or unintentionally by prohibited activities.

BEFORE YOU LEAVE:

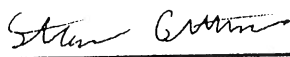
- Check your sleeping and retreat rooms for personal articles.
- Turn off lights, room heating/cooling units (ARC only) and shut doors.
- Return all furniture where you found it. You will be charged for moved furniture.
- Return all recreation equipment to host.
- Leave all Adult Retreat Center keys on the hook outside your room. There is a \$10 fee for lost keys.
- You may give your payment to the weekend host

I have read and agree to the Terms of Agreement and Statement of Conduct as stated above. I will provide information to my group regarding facility rules and regulations. I understand other groups may be present and that we need to be courteous and observe schedules. I understand that the contract fee is non-refundable and must accompany this signed document. *I understand that deposits are due based on the information provided in the contract so that at least 50% has been paid prior to the event. I understand that pictures of our group may be used by Manitoqua for promotional purposes. I understand my credit card will be charged if retreat balance is past due over 90 days. A 2% processing fee is required for all credit card transactions.*


Signature, Mokena Intermediate School

Principal
Title

2/19/25
Date


Signature

Guest Services Coordinator
Title

February 14, 2025
Date

Vendor Number: _____

2nd payment
Dene 4/12/25

PAYMENT REQUEST

FY25

Write check to: Camp Manitoqua Date: 4/2/2025

Explanation of purchase: 5th grade outdoor ed

Invoice Number/Date: 378070

Amount of Check: \$381.25

Account Number: 10e003 1101 3200



Check Number: _____ (district office use)

Date of Check: _____ (district office use)

School: M.I.S.

Administrator's Signature: _____

David D'Almeida

SPECIAL INSTRUCTIONS:



Return check to: _____



Mail attachments with check _____



Other: _____

Note: If Item(s) are charged to equipment Inventory Tag No.: _____

please fill out the following: Location: _____

Serial No.: _____

Attach backup/receipt(s) to this form. Keep copies for your records,
submit originals, with an administrator's signature, to District Office,
Attention: Peggy Ryan, Accounts Payable.

Booking Contract: OE | 05.13.25

Organization: Mokena Intermediate School**Address:** 11331 W 195th Street**City/State/Zip:** Mokena, IL 60448**Country:****Primary Contact:** Steven Roberts**Contact Email:** robertss@mokena159.org**Booking Type:** Outdoor Education/AZ**Booking Number:** 278070**Contact Phone:****Dates****Arrival Date:** May 13, 2025**Arrival Time:** 9:15 AM**Departure Date:** May 13, 2025**Departure Time:** 1:00 PM**Guests****Expected Number:** 50**Actual Number:****Reservations****Resources****Recreational Activities**

Name	From	To	Notes
Super Slides	May 13 9:15 AM	May 13 1:00 PM	
Slingshot Biathlon	May 13 9:15 AM	May 13 1:00 PM	

Nature Studies

Name	From	To	Notes
Archery	May 13 9:15 AM	May 13 1:00 PM	

Adventure Zone

Name	From	To	Notes
Initiatives	May 13 9:15 AM	May 13 1:00 PM	

Meals and Requests**Financial Information****Charges**

Date	Description	Quantity	Rate	Units	Total
May 22, 2024	Initiatives 1 @ \$12.25 x 50 Person	1	\$12.25	50	\$612.50
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Total Payments:	\$ 0.00
Postdated Payments:	\$ 0.00
Amount Due:	\$ 1,525.00

Deposit Schedule

Feb 28, 2025 - Contract Fee Due: \$381.25

Apr 13, 2025 - Deposit Due: ~~\$381.25~~

May 28, 2025 - Final Amount Due: \$762.50

Terms of Agreement:

CONTRACT DEADLINE: Feb 28, 2025

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Statement of Conduct:

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- You may only use the facilities listed on this contract.
- Keep the noise level to a whisper outdoors after 11 p.m. This is the village appointed noise ordinance time.
- Please ask permission before you use the game room. Adults must be present to supervise the fun.

FACILITIES CARE:

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- Keep your vehicles in the designated parking lot. **Driving on the grounds is prohibited.**
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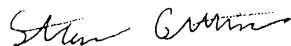
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Signature, Mokena Intermediate School

Principal
Title

2/19/25
Date


Signature

Guest Services Coordinator
Title

February 14, 2025
Date

Vendor Number: _____

2nd payment
Due 4/12/25

PAYMENT REQUEST

FY25

Write check to: Camp Manitoqua Date: 4/2/2025

Explanation of purchase: 5th grade outdoor ed

Invoice Number/Date: 968225

Amount of Check: \$533.75

Account Number: 10e003 1101 3200



Check Number: _____ (district office use)

Date of Check: _____ (district office use)

School: M.I.S. Administrator's Signature: [Signature]

SPECIAL INSTRUCTIONS:

- ☒ Return check to: _____
- ☐ Mail attachments with check _____
- ☐ Other: _____

Note: If Item(s) are charged to equipment Inventory Tag No.: _____

please fill out the following: Location: _____

Serial No.: _____

Attach backup/receipt(s) to this form. Keep copies for your records,
submit originals, with an administrator's signature, to District Office,
Attention: Peggy Ryan, Accounts Payable.

Booking Contract: OE | 05.12.25

Organization: Mokena Intermediate School**Address:** 11331 W 195th Street**City/State/Zip:** Mokena, IL 60448**Country:****Primary Contact:** Steven Roberts**Contact Email:** robertss@mokena159.org**Booking Type:** Outdoor Education/AZ**Booking Number:** 968225**Contact Phone:****Dates****Arrival Date:** May 12, 2025**Arrival Time:** 9:15 AM**Departure Date:** May 12, 2025**Departure Time:** 1:00 PM**Guests****Expected Number:** 70**Actual Number:****Reservations****Resources****Recreational Activities**

Name	From	To	Notes
Super Slides	May 12 9:15 AM	May 12 1:00 PM	
Slingshot Biathlon	May 12 9:15 AM	May 12 1:00 PM	

Nature Studies

Name	From	To	Notes
Archery	May 12 9:15 AM	May 12 1:00 PM	

Adventure Zone

Name	From	To	Notes
Initiatives	May 12 9:15 AM	May 12 1:00 PM	

Meals and Requests**Financial Information****Charges**

Date	Description	Quantity	Rate	Units	Total
May 22, 2024	Initiatives 1 @ \$12.25 x 70 Person	1	\$12.25	70	\$857.50
May 22, 2024	Archery 1 @ \$7.25 x 70 Person	1	\$7.25	70	\$507.50
May 22, 2024	Super Slides 1 @ \$5.50 x 70 Person	1	\$5.50	70	\$385.00
May 22, 2024	Slingshot Biathlon 1 @ \$5.50 x 70 Person	1	\$5.50	70	\$385.00

Total Fees:	\$ 2,135.00
Total Payments:	\$ 0.00
Postdated Payments:	\$ 0.00
Amount Due:	\$ 2,135.00

Deposit Schedule

Feb 28, 2025 - Contract Fee Due: \$533.75

Apr 12, 2025 - Deposit Due: \$533.75

May 27, 2025 - Final Amount Due: \$1,067.50

Terms of Agreement:

CONTRACT DEADLINE: Feb 28, 2025

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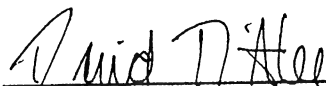
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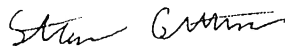
Signature, Mokena Intermediate School

Principal

Title

2/19/25

Date



Signature

Guest Services Coordinator

Title

February 14, 2025

Date