Synergy Geothermal-Heating-Cooling
3036 Park Dr.
Sturgeon Bay, WI 54235
Phone # 920-743-2900
www.synergygeo.com

Proposal

Date	Estimate #
6/16/2014	793

Name / Address	Service Address
Town of Washington Island P.O. Box 220 Washington Island, WI 54246	Washington Island Community Center 910 Main Rd. Washington Island, WI 54246

Customer E-mail	Customer Phone	Rep	Job Name
		BJG	

Description	Qty	Rate	Total
Install Multizone Mitsubishi Heating and Cooling System to include: Mitsubishi MXZ8B48NA 3 zone outdoor unit 3-SLZKA15NA ceiling cassette 15,000 BTU indoor units Line set, Line Hide, Condenser Pad, Condenser Rack $250.00 Electrical Allowance Start-up and secure operation		14,500.00	14,500.00
Install a Single Zone Mitsubishi Heating and Cooling System to include: Mitsubishi SLZKA15NA SYSTEM 15,000 BTU outdoor unit with Ceiling Cassette Indoor Condenser Pad, Rack, Line Set,. Line Hide to cove exposed Line Set $250 Electrical Allowance Start-up and secure operation		4,500.00	4,500.00

Terms: Downpayment of 50% of the contract with balance due upon completion. Interest in the amount of 1.83% per month or 22% annually will be charged on past due accounts. Please sign and return one copy within 30 days. After 30 days this contract is invalid. Construction is to be completed within 6 month of acceptance or may be subject to a price increase. All credit card charges in excess of $1000.00 are subject to a 3% service charge.

Total $19,000.00

Signature _____

Glatfelter Specialty Benefits℠
A Division of Glatfelter Insurance Group

A Tradition of Service, Founded on Trust.®

January 30, 2014

Address Block

As a valued VFIS and The Horton Group, Inc. Service Award Program (SAP) client we want to share some important news with you.

Allstate's decision to sell Lincoln Benefit Life (LBL) to Resolution Life Holdings and immediately stop issuing new annuity policies combined with certain ongoing administrative issues with LBL has led us to the decision to identify an alternate carrier for your fixed annuity.

While Allstate has agreed to continue servicing existing contracts for the next twelve to eighteen months, no formal plan has been announced for longer term servicing of their existing policies and annuity contracts.

Even before the sale, LBL stopped selling new fixed annuities. As discussed below some plans will not be able to contribute new SAP dollars to their existing LBL contract. The following are some of the common issues which will be eliminated if you elect to change carriers, as we recommend:

- LBL limits annual contributions to $50,000.
- LBL does not issue distributions of less than $250.
- There is a question over the longer term regarding how LBL contracts might be serviced in the future.
- LBL contract requires an individual person to be named as the Annuitant. This requirement is cumbersome and will not be required under the Mass Mutual contract.
    - The Annuitant's social security number was required
    - When an annuitant changes (e.g. the town clerk retires) the contract had to be terminated and liquidated in five years.

Our proposed solution is to offer our existing SAP clients a Group Annuity Contract underwritten by Mass Mutual. VFIS has been using this contract in various states for the last 20+ years. The product offers a Full Guarantee of Principal, a minimum interest guarantee of 3%, and benefit distributions at book value. This contract features:

- Benefit distributions at book value with no surrender charges regardless of the amount withdrawn.
- No need to name an individual as annuitant. The Sponsor owns and controls the contract.
- Mass Mutual will prepare the 1099 forms at no additional cost.
- Simplified financial statements.
- No limit on the amount of deposits accepted.
- No contract termination charges. Funds can be liquidated at market value.
- VFIS has a strong long term relationship with the carrier.
- The carrier has assigned a team of representatives familiar with our account to ensure quality service.

183 Leader Heights Road • P.O. Box 2726 • York, Pennsylvania 17405
(717) 741-0911 • (800) 233-1957 • Fax (717) 747-7069 • www.vfis.com

We hope to have the opportunity to meet with you to outline the details of the new Group Annuity Contract. You will receive a specimen contract and fact sheet illustrating the Mass Mutual program. You will have the opportunity to elect to transition your assets into the Mass Mutual Group Annuity Contract, as we recommend, or to remain with Lincoln Benefit Life. If you elect to continue your Fixed Annuity Contract with Lincoln Benefit we will continue to service your accounts. However, it is important to recognize that if the individual named annuitant changes, it will be necessary to liquidate and purchase a new Annuity contract. In addition, we will be evaluating the 1099R issuance procedure.

Please feel free to contact your Horton Group Representative at-1-800-472-4779 or Specialty Benefits at 1-800-233-1957 if you have any questions. Representatives will be available to meet with you to review your SAP account.

Sincerely,

Valerie Carpenter <townoffice@washingtonisland-wi.gov>

FW: Service Award Program - Town of Washington - Fire Department

1 message

Tom Ketchum <Tom.Ketchum@thehortongroup.com> Thu, Jun 19, 2014 at 11:40 AM
To: "townoffice@washingtonisland-wi.gov" <townoffice@washingtonisland-wi.gov>
Cc: Michelle Strauss <michelle.strauss@thehortongroup.com>

Hi Valerie:

As we discussed attached is a generic copy of a letter that may have gone to someone else. It basically states we have another option for our SAP clients which is being offered due to some difficulties with LBL.

If you have any questions or need further information feel free to contact me on my cell – 715-581-1461.

Thanks.

Thomas L. Ketchum, CPCU / Sr. Account Manager

The Horton Group, Inc.

PO Box 1084 / Wausau, WI 54402-1084

Insurance/Risk Management/Employee Benefits

www.thehortongroup.com / tom.ketchum@thehortongroup.com

Phone: Cell: 715-581-1461

NOTICE: This message is intended exclusively for the individual or entity to which it is addressed. This communication may contain information that is proprietary, privileged, or confidential. If you are not the named addressee, you are not authorized to read, print, retain, copy, or disseminate this message or any part of it. If you have received this message in error, please notify the sender immediately by e-mail or fax and delete all copies of this message.

2 attachments

Transfer letter - Generic copy.pdf
56K

MassMutual Fact Sheet.pdf
318K

County of Door
HIGHWAY DEPARTMENT
1001 South Duluth Avenue
Sturgeon Bay, WI 54235-3812

John P. Kolodziej, PE
Highway Commissioner
(920) 746-2500
kolodzie@co.door.wi.us

Mr. Joel Gunnlaugsson
Chairman, Town of Washington
P.O. Box 220
Washington Island, WI 554246

July 7, 2014

Re: Washington Island 2014 Town Road Construction Estimates

Joel,

The following are the cost estimates for the project list provided by the town. The estimates do not include the cost of the aggregate material which is supplied by the town, but includes trucking and placement as necessary.

Main Road: Gudmundsen Drive North to Dead End – Total Length 1.01 Mile. Work includes grading the existing gravel roadway, compacting, and placement of a 2.5 inch hot mix asphalt surface, 20 feet in width and placement of a 2' gravel shoulder. At the north end a widened parking area will be paved, 48' x 85'.
Total Estimate.....$159,878

Michigan Road: Airport Road to Range Line Road. 2680 feet. 20' wide. Perform base repair on 100 foot section, patch, then install hot mix asphalt wedge and overlay (total of 2.25") on entire roadway, and shoulder. Total Estimate..... $75,300
LRIP Funds ..... ($14,450)
Net Town Cost..... $60,850

Airport Road: Michigan Road to Lake View Road. 2680 feet. 20' wide. Perform base repair on 100 foot section, patch, then install hot mix asphalt wedge and overlay (total of 2.25") on entire roadway, and shoulder. Total Estimate..... $75,300

Town Line Road: Install 4 foot paved shoulder on four sections. Three segments on south side of roadway totaling 4,630 feet, and one segment on the north side totaling 2390 feet. Estimate includes excavation for gravel base course, placement of gravel base, compaction, placing a 2.5 inch hot mix asphalt paved shoulder, and shoulder.
Total Estimate..... $56,050

Sand Shed Patch: Paving a 30' x 40' x 3" hot mix asphalt patch.
Total Estimate .....$2,400.

Aznoe Road: Estimate includes placement of a hot mix asphalt wedge and overlay on a 1000 foot section, 20 feet in width, and shouldering. Total thickness is 2.5".
Total Estimate..... $26,670

Michigan Road, East of East Side Road: Estimate includes placement of a hot mix asphalt wedge and overlay on a 320 foot section, 20 feet in width, and shouldering. Total thickness is 2.5". Total Estimate..... $9,960

School House Beach: Estimate includes placement of a hot mix asphalt surface on 790 feet, 11 feet in width, and shouldering. Total thickness is 2.0".
Total Estimate..... $11,170

Foss Road: Estimate includes placement of a hot mix asphalt wedge and overlay on a 2620 foot section, 20 feet in width, and shouldering. Total thickness is 2.25".
Total Estimate..... $66,360

Landfill Access Road: Estimate includes placement of a 3 inch hot mix asphalt surface over gravel on a 500' x 12' area and a 30' x 300' area. Prep work for grading and compacting base is not included in the price.
Total Estimate..... $25,920

Should you have any questions, please do not hesitate to contact me.

Sincerely,

John P. Kolodziej, PE
Commissioner

COPY

APPLICATION FOR AN "OPERATOR'S LICENSE

to Serve Fermented Malt Beverages and Intoxicating Liquors

Washington Island, WI July (Month), 2014 (Year)

I, the undersigned, do hereby respectfully make application to the local governing body of the Town of Washington, County of Door, Wisconsin for a License to serve, from date hereof to June, 2016, inclusive (unless sooner revoked), Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations imposed by Section 125.32(2) and 125.68(2) of the Wisconsin Statutes and all acts amendatory thereof and supplementary thereto, and hereby agree to comply with all laws, regulations, ordinances and regulations, Federal, State or Local, affecting the sale of such beverages and liquors if a license be granted to me.

I certify that I am 20 years of age. Date of Birth 11/11/93 x HW Bjarnarson
Signature of Applicant

Answer the following questions fully and completely:

Name of Applicant Hunter (First) W (MI) Bjarnarson (Last) Is application new or a renewal? New

Address of Applicant 999 Jackson Hb Rd Washington Island WI

If renewal (within the past 2 years held a Class "A", "Class A", Class "B", or "Class B" license or permit or a manager's or operator's license), where was the privilege obtained? (City) (Town) (Village) _____

As required by WI Statutes Section 125.17(6), have you completed the alcohol awareness course? Yes

If so, where? On line

Have you been convicted of any felony or of violating any law of the State of Wisconsin or of the United States? NO

Date of such conviction _____ Name of Court _____

Nature of offense _____

Have you been convicted of violating any license law or ordinance regulating the sale of Fermented malt beverages or intoxicating liquors?

NO Date of violation _____ Nature of violation _____

STATE OF WISCONSIN

Door County ss.

Hunter W. Bjarnarson, being first duly sworn on oath says that (s)he is the person who made and signed the ~~foregoing~~ application for an operator's license; that all the statements made by the applicant are true.

x HW Bjarnarson
Applicant sign here

Subscribed and sworn to before me this 3 day of July, 2014

Tamre L. Jorgenson
Notary Public
State of Wisconsin

Tamre L Jorgenson
Notary Public, Door County,

Licensing

APPLICATION FOR AN "OPERATOR'S LICENSE

COPY

to Serve Fermented Malt Beverages and Intoxicating Liquors

Washington Island, WI 7 , 2014
Month Year

I, the undersigned, do hereby respectfully make application to the local governing body of the Town of Washington, County of Door, Wisconsin for a License to serve, from date hereof to June , 2016 , inclusive (unless sooner revoked), Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations imposed by Section 125.32(2) and 125.68(2) of the Wisconsin Statutes and all acts amendatory thereof and supplementary thereto, and hereby agree to comply with all laws, regulations, ordinances and regulations, Federal, State or Local, affecting the sale of such beverages and liquors if a license be granted to me.

I certify that I am 36 years of age. Date of Birth 11/04/79 x _____
Signature of Applicant

Answer the following questions fully and completely:

Name of Applicant Jess Roberts Is application new or a renewal? Yes
(First) (MI) (Last)

Address of Applicant 1517 Old West Harbor Road

If renewal (within the past 2 years held a Class "A", "Class A", Class "B", or "Class B" license or permit or a manager's or operator's license), where was the privilege obtained? (City) (Town) (Village) Washington Island

As required by WI Statutes Section 125.17(6), have you completed the alcohol awareness course? Yes

If so, where? online

Have you been convicted of any felony or of violating any law of the State of Wisconsin or of the United States? NO

Date of such conviction _____ Name of Court _____

Nature of offense _____

Have you been convicted of violating any license law or ordinance regulating the sale of Fermented malt beverages or intoxicating liquors? NO Date of violation _____ Nature of violation _____

STATE OF WISCONSIN

Door County ss.

Jess Roberts, being first duly sworn on oath says that (s)he is the person who made and signed the foregoing application for an operator's license; that all the statements made by the applicant are true.

X _____
Applicant sign here

Subscribed and sworn to before me this 1 day of July , 2014

Tamre L. Jorgenson
Notary Public
State of Wisconsin

Licensing.

Tamre L Jorgenson
Notary Public, Door County,

APPLICATION FOR AN "OPERATOR'S LICENSE" COPY

to Serve Fermented Malt Beverages and Intoxicating Liquors

Washington Island, WI June (Month), 2014 (Year)

I, the undersigned, do hereby respectfully make application to the local governing body of the Town of Washington, County of Door, Wisconsin for a License to serve, from date hereof to June, 2016, inclusive (unless sooner revoked), Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations imposed by Section 125.32(2) and 125.68(2) of the Wisconsin Statutes and all acts amendatory thereof and supplementary thereto, and hereby agree to comply with all laws, regulations, ordinances and regulations, Federal, State or Local, affecting the sale of such beverages and liquors if a license be granted to me.

I certify that I am 23 years of age. Date of Birth 7/10/90 x Melanie Enger
Signature of Applicant

Answer the following questions fully and completely:

Name of Applicant Melanie (First) Anne (MI) Enger (Last) Is application new or a renewal? Renewal

Address of Applicant 849 Main Rd, Washington Island, WI

If renewal (within the past 2 years held a Class "A", "Class A", Class "B", or "Class B" license or permit or a manager's or operator's license), where was the privilege obtained? (City) (Town) (Village) Washington Island, WI

As required by WI Statutes Section 125.17(6), have you completed the alcohol awareness course? Yes

If so, where? online

Have you been convicted of any felony or of violating any law of the State of Wisconsin or of the United States? no

Date of such conviction — Name of Court —

Nature of offense —

Have you been convicted of violating any license law or ordinance regulating the sale of Fermented malt beverages or intoxicating liquors?

— Date of violation — Nature of violation —

STATE OF WISCONSIN

ss.

Door County

Melanie Enger, being first duly sworn on oath says that (s)he is the person who made and signed the foregoing application for an operator's license; that all the statements made by the applicant are true.

x Melanie Enger
Applicant sign here

Subscribed and sworn to before me this 17 day of June, 2014

Tamre L. Jorgenson
Notary Public
State of Wisconsin

Licensing 309 824 2352

Tamre L. Jorgenson
Notary Public, Door County,

APPLICATION FOR AN "OPERATOR'S LICENSE

to Serve Fermented Malt Beverages and Intoxicating Liquors

COPY

Washington Island, WI July (Month), 2014 (Year)

I, the undersigned, do hereby respectfully make application to the local governing body of the Town of Washington, County of Door, Wisconsin for a License to serve, from date hereof to June, 2016, inclusive (unless sooner revoked), Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations imposed by Section 125.32(2) and 125.68(2) of the Wisconsin Statutes and all acts amendatory thereof and supplementary thereto, and hereby agree to comply with all laws, regulations, ordinances and regulations, Federal, State or Local, affecting the sale of such beverages and liquors if a license be granted to me.

I certify that I am 34 years of age. Date of Birth 11/20/1979 x Amanda Danforth
Signature of Applicant

Answer the following questions fully and completely:

Name of Applicant Amanda (First) R. (MI) Danforth (Last) Is application new or a renewal? renewal

Address of Applicant 1422 South Shore Dr Washington Island, WI 54246

If renewal (within the past 2 years held a Class "A", "Class A", Class "B", or "Class B" license or permit or a manager's or operator's license), where was the privilege obtained? (City) (Town) (Village) Washington

As required by WI Statutes Section 125.17(6), have you completed the alcohol awareness course? yes

If so, where? Washington Island

Have you been convicted of any felony or of violating any law of the State of Wisconsin or of the United States? NO

Date of such conviction — Name of Court —

Nature of offense —

Have you been convicted of violating any license law or ordinance regulating the sale of Fermented malt beverages or intoxicating liquors? NO Date of violation — Nature of violation —

STATE OF WISCONSIN

ss.

DOOR County

Amanda Danforth, being first duly sworn on oath says that (s)he is the person who made and signed the foregoing application for an operator's license; that all the statements made by the applicant are true.

x Amanda Danforth
Applicant sign here

Subscribed and sworn to before me this 8 day of July, 2014

Tamre L. Jorgenson
Notary Public
State of Wisconsin

Licensing.

Tamre L Jorgenson
Notary Public, DOOR County,

APPLICATION FOR AN "OPERATOR'S LICENSE

to Serve Fermented Malt Beverages and Intoxicating Liquors

COPY

Washington Island, WI June (Month), 2014 (Year)

I, the undersigned, do hereby respectfully make application to the local governing body of the Town of Washington, County of Door, Wisconsin for a License to serve, from date hereof to June, 2016, inclusive (unless sooner revoked), Fermented Malt Beverages and Intoxicating Liquors, subject to the limitations imposed by Section 125.32(2) and 125.68(2) of the Wisconsin Statutes and all acts amendatory thereof and supplementary thereto, and hereby agree to comply with all laws, regulations, ordinances and regulations, Federal, State or Local, affecting the sale of such beverages and liquors if a license be granted to me.

I certify that I am 55 years of age. Date of Birth 05.10.59 x Christy Davidson
Signature of Applicant

Answer the following questions fully and completely:

Name of Applicant (First) CHRISTY (MI) S (Last) DAVIDSON Is application new or a renewal? Renewal

Address of Applicant 6680 Townline Rd P.O. Box 44 Washington Island, Wi 54246

If renewal (within the past 2 years held a Class "A", "Class A", Class "B", or "Class B" license or permit or a manager's or operator's license), where was the privilege obtained? (City) (Town) (Village) Washington Island, Wi. 54246

As required by WI Statutes Section 125.17(6), have you completed the alcohol awareness course? Yes

If so, where? Washington Island, Wi 54246

Have you been convicted of any felony or of violating any law of the State of Wisconsin or of the United States? NO

Date of such conviction _____ Name of Court _____

Nature of offense _____

Have you been convicted of violating any license law or ordinance regulating the sale of Fermented malt beverages or intoxicating liquors?

NO Date of violation _____ Nature of violation _____

STATE OF WISCONSIN

Door County ss.

Christy Sue Davidson, being first duly sworn on oath says that (s)he is the person who made and signed the foregoing application for an operator's license; that all the statements made by the applicant are true.

x Christy Sue Davidson
Applicant sign here

Subscribed and sworn to before me this 23 day of June, 2014

Tamre L. Jorgenson
Notary Public
State of Wisconsin

Licensing

Tamre L Jorgenson
Notary Public, Door County,

847-3353