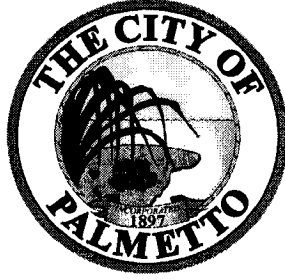


TAB 2



POLICE OFFICERS' PENSION PLAN
PAYMENT REQUISITION

Salem Trust is hereby authorized to make the following payment from the Police Officers' Pension Plan, #80103100.

Date: January 5, 2009

Vendor: Bogdahn Consulting, LLC
340 W. Central Ave., Suite 300
Winter Haven, FL 33880

Amount: \$2,625.00

Description: Invoice #3669
Billing 10/1-12/31/08

TRUSTEE APPROVAL: ***N/A APPROVED DIRECT PAYMENT VENDOR***

Trustee

Date

Trustee

Date



THE
**BOGDAHN
GROUP**

340 West Central Avenue Suite 300 Winter Haven, FL 33880

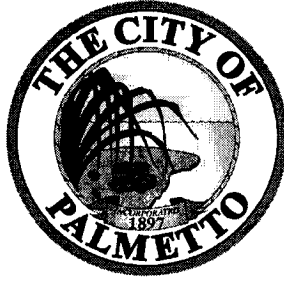
Invoice

Date	Invoice #
12/29/2008	3669

Bill To

City of Palmetto
Att: Diane Ponder
PO Box 1209
Palmetto, FL 34220

Description	Amount
Performance Evaluation and Consulting Services 10/01/08 - 12/31/08	2,000.00
additional portfolio evaluation - international equity	625.00
	DEC 31 2008
Balance Due	\$2,625.00



POLICE OFFICERS' PENSION PLAN
PAYMENT REQUISITION

Salem Trust is hereby authorized to make the following payment from the Police Officers' Pension Plan, #80103100.

Date: December 23, 2008

Vendor: Gabriel Roeder Smith & Company
One East Broward Blvd.
Suite 505
Ft. Lauderdale, FL 33301-1872

Amount: \$1,529.00

Description: Invoice 106518
Services through 10/31/08

TRUSTEE APPROVAL: ***N/A APPROVED DIRECT PAYMENT VENDOR***

Trustee

Date

Trustee

Date



Gabriel Roeder Smith & Company

Consultants & Actuaries
One East Broward Blvd.
Suite 505
Ft. Lauderdale, Florida 33301-1872
(954) 527-1616

Invoice

Date	Invoice #
10/31/2008	106518

Bill To:

**BOARD OF TRUSTEES, PALMETTO POLICE OFFICERS
RETIREMENT PLAN**

Ms. Sharon Jones
Director of Human Resources
City of Palmetto
516 8th Avenue West
Palmetto, FL 34221

Please Remit To:

Dept. # 78009
Gabriel Roeder Smith & Company
PO Box 78000
Detroit, Michigan 48278-0009

or

ACH Payment to:
Gabriel Roeder Smith & Company
JPMorgan Chase, ABA #: 072000326
Account #: 0486723

Description	Project #	Amount
For services rendered through 10/31/08.		
1. Retirement Benefit Calculation for: Lowe.	2125-108	\$300
2. Preparation of page 6a for inclusion in the 2008 State Report.	2125-108	\$550
3. Charges to date for preparation of the 10/1/08 Actuarial Valuation Report.	2125-108	\$679
Invoice Total		\$1,529
Paid to Date		
Client No. 2125	Amount Due	\$1,529

PLEASE INDICATE THE INVOICE NUMBER ON YOUR REMITTANCE. THANK YOU.

City Of Palmetto

P.O. Box 1209, 516 8th Avenue West
 Palmetto, FL 34220-1209
 Phone: (941) 723-4570

INVOICE: 407054003

Page: 1 of 1

***** CUSTOMER *****

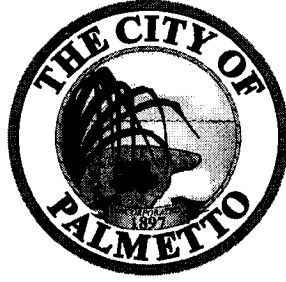
Garry Lowe
 2117 7th St W
 Palmetto, FL 34221

***** DELIVER TO *****

Invoice Date	Due Date	Ship Via	FOB	Terms	Reference
11/07/08	12/07/08			NET 30	

Contact	Customer No.	Phone	Fax
	516		

Quantity	UOM	Description	Unit Price	Extended
1.00	ea	Retirement Benefit Calculation	300.0000	300.00
			SUBTOTAL:	300.00
				.00
			TOTAL DUE:	300.00



POLICE OFFICERS' PENSION PLAN
PAYMENT REQUISITION

Salem Trust is hereby authorized to make the following payment from the Police Officers' Pension Plan, #80103100.

Date: October 31, 2008

Vendor: Christiansen & Dehner
63 Sarasota Center Blvd, #107
Sarasota, FL 34240

Amount: \$884.75

Description: Invoice #15426

TRUSTEE APPROVAL: ***N/A APPROVED DIRECT PAYMENT VENDOR***

Trustee

Date

Trustee

Date

Christiansen & Dehner, P. A.

63 Sarasota Center Boulevard
Suite 107
Sarasota, FL 3424

941-377-2200
Phone

941-377-4848
Fax

October 31, 2008

City of Palmetto Police Officers'
Retirement Plan
P. O. Box 1209
Palmetto FL 34220-1209
Attn: Diane Ponder

Invoice No. 15426

In Reference To: City of Palmetto Police Officers'
Retirement Plan

9422

Professional Services

	<u>Hours</u>	<u>Amount</u>
10/15/2008 Preparation of new PF-15, Special Tax Notice Regarding Plan Payments and PF-17, Lump-Sum Distribution Election Form, for changes to the Internal Revenue Code regarding rollovers to a Roth IRA.	0.20	58.00
10/22/2008 Preparation and attendance at Board Meeting.	2.00	580.00
Travel time	1.50	217.50
For professional services rendered	<u>3.70</u>	<u>\$855.50</u>
Additional Charges :		
	<u>Qty</u>	
10/22/2008 Car Expense	1	29.25
Total additional charges		<u>\$29.25</u>
Total amount of this bill		<u>\$884.75</u>
Balance due		<u>\$884.75</u>

** Please note that the "Balance Due" figure at the end of this bill reflects both "Total New Charges - Current Period" and any previous balances due. In most cases, if the previous balance(s) have already been approved for payment but not yet received in our office, you should be paying only the "Total New Charges - for services and/or expenses". Thank you.

**Please indicate account number(s) with payment.
(Please Deduct any payments not reflected in Balance due)**