

Mark Robert Isaf
State's Attorney

statt@edgarcounty-il.gov

EDGAR COUNTY STATE'S ATTORNEY

Edgar County Courthouse
115 W. Court St., Room S
Paris, IL. 61944-1787

Phone: 217/466-7456

Fax: 217/466-7454

Kyle P. Hutson
Assistant State's Attorney

khutson@edgarcounty-il.gov

COPY

August 2, 2012

Mr. S. Craig Smith
Asher & Smith Law Office
1119 North Main Street
Paris, Illinois 61944

Re: ETSB

Dear Craig:

I received information from Mr. Kirk Allen alleging the ETSB issued a payment for legal services it requested of you in May of 2011. I attach a copy of the payment request and legal invoice. I can advise you that the board lacked the authorization to approve payment for legal services absent your formal appointment by the court and thus the action by ETSB is void. Please review and confirm my understanding of the facts. I propose that the funds paid for your services be returned to the ETSB account held by the Edgar County Treasurer. If you provide a copy of the letter accompanying your firm's check to me, I will provide copies to ETSB and Chairman Keller. If you have any questions please don't hesitate to contact me.

Sincerely,

Mark R. Isaf
Edgar County State's Attorney

MRI/ab
enclosure

8/6/12
advised State's Attorney
&
911 of
check.
DM

RECEIVED
AUG 06 2012
EDGAR CO. TREASURER

Mark
I agree. Will take a copy
of your letter and check to
Edgar County Treasurer for
reimbursement of \$1,157.95
Thanks

CLAIM FOR PAYMENT

USE A SEPARATE FORM FOR EACH VENDOR

COPY

VENDOR NO:	
BOARD APPROVED:	6/13/11
COMMITTEE NO:	91
G/L DATE:	6/13/11

VENDOR	ASHER & SMITH			FUND:	600
ADDRESS	PO BOX 340			DEPT:	000
CITY	PARIS			ACCT:	6070
STATE	IL	ZIP	61944		

FOR PAYMENT OF THE FOLLOWING DESCRIBED SERVICES OR MERCHANDISE:

INVOICE DATE	INVOICE #	DESCRIPTION	AMOUNT
5/31/11	53111	LEGAL SERVICES RENDERED	1,157.95
TOTAL CLAIMS			1,157.95

NOTE* Invoice(s) must accompany ALL request for payment.

DEPT. HEAD	NANETTE BEALS	DATE:	6/6/11
CO. CLERK		DATE:	
CO. TREAS.		DATE:	

COUNTY CLERK
COUNTY TREASURER
OFFICE HEAD

8478

ASHER & SMITH
1119 N. MAIN ST. • P.O. BOX 340
PARIS, IL 61944
(217) 465-6444

70-803-711

DATE 8/6/12

PAY
TO THE
ORDER OF F T S B

\$ 1,157.95

One thousand one hundred fifty seven and 95/100 DOLLARS

Reimburse Atty Fees

[Handwritten Signature]

THIS CHECK IS DELIVERED FOR PAYMENT ON THE ACCOUNTS LISTED

⑈008478⑈ ⑆071108038⑆

PARIS FIRST
600 E. JASPER
PARIS, IL 61944
BRANCH OF STATE BANK OF CHRISTIAN



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