

City of Chicago



CL2016-607

Office of the City Clerk

Document Tracking Sheet

Meeting Date: 2/10/2016

Sponsor(s): Burke (14)

Type: Claim

Title: Denial of condominium refuse rebate claims

Committee(s) Assignment: Committee on Finance



Chicago, February 10th, 2016

To the President and Member of the City Council:	To	the	President	and	Member	of the	City	Council:
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This recommendation was concurred in by

member of the committee (with_____

Your Committee on Finance, Condominium Refuse Rebate Division, to which was referred on 01-13-2016 and on subsequent dates, sundry claim as follows (List of Denied Condominium Refuse Rebate attached to this Committee Letter) having had the same under advisement, begs leave to report and recommend that Your Honorable Body Do Not Pass Said Claims for Payment

Respectfully submitted.

(a viva voce vote of the)

dissenting vote(s)).



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REPORT DATE: 2/05/2016
REPORT TIME: 11:36:13
PROGRAM: RRR272

C I T Y O F C H I C A G O
COMMITTEE ON FINANCE
REFUSE REBATE COUNCIL ORDERS--DID NOT PASS

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MEETING DATE 2/10/2016

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43	MICHELE SMITH		2015	ANNUAL	16	616-624 SCHUBERT AVE CONDO
47	AMEYA PAWAR		2015	ANNUAL	13	4836 -38 N PAULINA CONDO ASSOC
47	AMEYA PAWAR		2015	ANNUAL	9	4815 N DAMEN CONDOMINIUM
47	AMEYA PAWAR		2015	ANNUAL	32	4420 NORTH CLARK STREET CONDO
47	AMEYA PAWAR		2015	ANNUAL	9	4405 N GREENVIEW CONDO ASSN
	JAMES CAPPLEMAN		2015	ANNUAL	12	2049 AINSLIE CONDOMINIUM
47	AMEYA PAWAR		2015	ANNUAL	31	1616 WEST MONTROSE BLOCK CONDO
43	MICHELE SMITH		2015	ANNUAL	6	1104 W. WEBSTER CONDO ASSOC.
47	AMEYA PAWAR		2015	ANNUAL	52	THE ROBEY CONDO ASSOC.
47	AMEYA PAWAR		2015	ANNUAL	47	SOUTHPORT PLACE CONDO
	SCOTT WAGUESPACK		2015	ANNUAL	18	SEMINARY GARDEN CONDOMINIUM
47	AMEYA PAWAR		2015	ANNUAL	14	PAULINA CONDOMINIUM ASSOC.
43	MICHELE SMITH		2015	ANNUAL	10	OZ PARK CONDO ASSOC.
47	AMEYA PAWAR		2015	ANNUAL	0	GRACELAND WEST CONDO ASSN.
47	AMEYA PAWAR		2015	ANNUAL	18	FOUNTAIN VIEW CONDO ASSOC.
47	AMEYA PAWAR		2015	ANNUAL	24	CLAREMONT LOFTS CONDOMINIUMS
47	AMEYA PAWAR		2015	ANNUAL	13	CLAREMONT CONDO ASSOC.
**** SPONSOR ************	***** SPONSC	AMOUNT OF REBATE		TYPE	NO. OF ELGIBLE UNITS	CONDOMINIUM/ COOPERATIVE NAME

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CONDOMINIUM/ COOPERATIVE NAME

NO. OF ELGIBLE UNITS

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PAGE 2
TERMINAL-- C7
OPERATORAQUEL

MEETING DATE 2/10/2016

TYPE

** GRAND TOTAL AMOUNT **

AMOUNT OF REBATE

****** SPONSOR **********

** GRAND TOTAL NUMBER **